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BARBADOS



# ANNUAL REPORT

OF THE

## DIRECTOR OF MEDICAL SERVICES

FOR THE YEAR

1961-62



GOVERNMENT PRINTING OFFICE, BAY STREET, BARBADOS.

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# ANNUAL REPORT

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ANNUAL REPORT OF THE DIRECTOR OF MEDICAL SERVICES FOR THE YEAR  
1961-62

Part I. MEMBERSHIP OF COMMITTEES

GENERAL BOARD OF HEALTH

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The Director of Highways & Transport  
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P. H. M. Stevens, Esq., Town and Country Planning Officer  
V. DaC. Boyce, Esq., — *Clerk.*

} Advisers attending  
by invitation

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H. Waite, Esq.  
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Mrs. F. A. Bishop, M.B.E.  
Mrs. W. Terajewicz  
Mrs. E. Parry  
Sister May Teresa, C.J.G.S.  
C. E. Edwards, Esq., Superintendent — *Secretary.*



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Dr. M. A. Byer, O.B.E., Director of Medical Services – *Chairman*  
Miss E. K. Walters, Matron, General Hospital (*ex officio*)  
Dr. F. N. Grannum, M.B.E., M.B., Ch.B. (Edin.), D.T.M.&H. (Eng.) M.P.H. (Harvard)  
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C. B. Vaughan, M.R.C.S. (Eng.), L.R.C.P. (Lond.)  
Miss M. I. Stuart, Principal Sister Tutor, General Hospital  
Mrs. E. Chandler  
Mrs. M. I. Stuart – *Secretary*.

#### BOARD OF MEDICAL ASSESSORS

Dr. M. A. Byer, O.B.E. – *Chairman*  
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Hon. Sir Grey Massiah, C.B.E., M.A., M.D., C.M., M.L.C.  
C. B. Vaughan, M.R.C.S., Ch.B., D.T.M. & H.

#### BOARD OF DENTAL ASSESSORS

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Dr. L. K. Nicholls  
E. W. Storey, D.D.S.

#### PUBLIC HEALTH ADVISORY COMMITTEE

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Councillor F. A. Greaves  
Councillor K. Forde  
Councillor V. W. A. Chase  
Mrs. K. L. Standard  
Dr. M. A. Byer, O.B.E., Director of Medical Services (*ex officio*)

### Part II. STAFF

2. Whole-time members as at 31st March, 1962.

#### Director of Medical Services

M. A. Byer, O.B.E., M.B., Ch.B. (Edin.), D.P.H. (Harvard)

#### Senior Medical Officer of Health

E. Cochrane, M.D., Ch.B. (U. Glasgow), D.P.H. (Lond.)

#### Health Officer (Port)

F. N. Grannum, M.B.E., M.B., Ch.B. (Edin.), D.T.M.&H. (Eng.), M.P.H. (Harvard)

#### Supervisor, Public Health Nurses

Miss A. Walters

#### Government Chief Public Health Inspectors

W. A. Abrahams, Esq., M.R.S.H.

S. J. Sealy, Esq., A.R.S.H.

#### Assistant Chief Public Health Inspector

E. Baird, Esq.

#### Office Superintendent

T. F. King, Esq., B.A. (Durham)

Clerical - 9  
Technical - 10  
Nursing - 1  
Other - 3

BARBADOS GENERAL HOSPITAL

Medical Superintendent

A. D. Sinclair, M.B., Ch.B., D.A., F.F.A.R.C.S. to 13th November, 1961

H. McD. Forde, M.R.C.S. (Eng.), L.R.C.P. (Lond.), M.B., B.S., (Lond.) M.D. (Lond.),  
D.P.H. (Eng.), M.R.C.P. (Edin.), D.T.M.&H. (Eng.) from 14th November, 1961.

Surgeon Specialist

A. G. Leacock, M.B., B.Chir., M.Chir. (U. Camb.), F.R.C.S. (Eng.)

Specialist Physician

H. McD. Forde, M.R.C.S. (Eng.), L.R.C.P. (Lond.), M.B., B.S. (Lond.), M.D. (Lond.),  
D.P.H. (Eng.), M.R.C.P. (Edin.), D.T.M.&H. (Eng.)

Vacant from 14th November, 1961.

Specialist Radiologist

Edith Smith, M.B., B.S., (U. Punjab), D.M.R.E. (Camb.)

Senior Anaesthetist

B. S. Skinner, M.R.C.S. (Eng.), L.R.C.P. (Lond.), F.A.C.A.

Junior Anaesthetist

Dr. D. M. Barr, M.B., Ch.B. (U. Glasgow)

Ophthalmic Surgeon

H. N. St. John, F.R.C.S. (Ed.), D.L.O.

Medical Registrar

A. C. Graham, M.R.C.S. (Eng.), L.R.C.P. (Lond.), M.B., B.S. (U. Lond.)

Surgical Registrar

R. K. Rowley, M.B., Ch.B., (U. Birm.)

Medical Officers, Grade "A"

M. M. R. Lewis, M.B., B.S.

G. A. O. Alleyne, M.B., B.S. (U. Lond.)

N. E. Procope, M.B., B.S.

G. M. Lorde, L.R.C.P. (Edin.), L.R.C.S. (Edin.), L.R.F.P.S. (Glasg.)

House Officers

M. Stoby, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

A. Bayley, M.B., Ch.B. (U. L'pool.)

Steward and Secretary

W. C. Goodman, Esq., M.B.E.

Matron

Miss E. K. Walters

Assistant Matron

Miss E. M. Skinner

Principal Sister Tutor

Miss I. Stuart

Sister Tutor

Miss O. Barrett



Departmental Sisters

Miss B. St. Hill  
Miss A. Mayers  
Miss C. Blackman  
Miss C. Estwick  
Miss E. Husbands

Physiotherapist

Miss D. I. Traynor

Radiographers

Miss N. Forde  
Mrs. J. Y. Worrell

Clerical - 18  
Nursing - 253  
Technical - 16  
Other - 270

BACTERIOLOGICAL AND PATHOLOGICAL LABORATORY

Bacteriologist and Pathologist

W. dos Santos, M.R.C.S., L.R.C.P., M.B., B.Chir. (Cantab.)

Assistant Bacteriologist and Pathologist

Mary Bools, M.D., Ch.B., B.A.O. (N.U. Irel.)

Clerical - 1  
Technical - 5  
Other - 2

MENTAL HOSPITAL

Medical Superintendent

Lt. Col. R. M. Lloyd-Still, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

Assistant Medical Superintendents

W. Terajewicz, M.D. (U. Cracow)

J. T. Murray-Aynsley, M.R.C.S. (Eng.), L.R.C.P. (Lond.) with effect from  
18th September, 1961.

Matron

Miss G. Bayley

Tutor

C. Bennett, Esq.

Head Male Nurse

A. E. Lewis, Esq.

Steward

V. Boyce, Esq.

Clerical - 4  
Nursing - 103  
Other - 40

LAZARETTO

Superintendent

C. E. Edwards, Esq.

Other - 17

## HEALTH CENTRES

### *Enmore*

#### Medical Officer of Health

L. Harney, L.M.S.S.A. (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.)  
M.P.H. (Harvard).

#### Laboratory Supervisor

V. A. A. Archer, B.Sc. (Mc.Gill), M.Sc. (Toronto), F.C.I.C.  
Vacant with effect from 8th September, 1961.

#### Senior Public Health Nurse

Mrs. B. Williams

#### Radiographer

Mrs. S. R. St. John

Clerical — 4

Nursing — 6

Technical — 2

Other — 9

### *Speightstown*

#### Medical Officer of Health

R. A. J. Webb, L.R.C.P., M.R.C.S., M.B., B.S.

#### Government Chief Public Health Inspector

L. Harris, Esq., M.R.S.H.

#### Senior Public Health Nurse

Miss M. Mayers

Clerical — 1

Nursing — 4

Technical — 1

Other — 4

### *Six Cross Roads*

#### Medical Officer of Health

K. L. Standard, M.B., B.S., M.P.H. (Pittsburgh) to 24th December, 1961.  
Vacant with effect from 25th December, 1961.

#### Government Chief Public Health Inspector

C. Haynes, Esq., M.R.S.H.

#### Senior Public Health Nurse

Miss I. Barrett

Clerical — 1

Nursing — 5

Technical — 1

Other — 4

## MATERNITY HOSPITAL

#### Matron

Miss L. V. Fearon to 30th April, 1961.  
Vacant with effect from 1st May, 1961.

Clerical — 1

Nursing — 4

Other — 13

3. Part-time members as at 31st March, 1962.

Assistant Health Officer (Port)

J. E. Walcott, M.B., Ch.B. (U. Glasgow), D.T.M. & H. (Eng.)

School Dentists

Dr. F. M. O. Alleyne

J. A. Smith, D.D.S.

T. E. H. Talma, D.D.S.

BARBADOS GENERAL HOSPITAL

Visiting Surgeons

A. L. Stuart, M.B., Ch.B., D.T.M.&H.

H. L. Massiah, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

A. S. Cato, M.B., Ch.B. (U. Edin.)

Assistant Visiting Surgeon

W. St.John, L.R.C.P., M.R.C.S., L.M.S.S.A. (Lond.)

Assistant Ophthalmic Surgeon

A. A. Gibbons, M.B., Ch.B. (U. Edin.), D.O.M.S., R.C.P.S. (Eng.) D.T.M. (L'pool.)

Ear, Nose and Throat Surgeon

A. O. W. F. Trieloff, M.D., L.M.C.C.

Assistant Ear, Nose and Throat Surgeon

F. G. Reader, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

Dental Surgeon

E. W. Storey, D.D.S.

MENTAL HOSPITAL

Visiting Physician

P. Branch, M.B., B.S. (U. Lond.)

MATERNITY HOSPITAL

Visiting Obstetrician

F. G. Reader, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

LAZARETTO

Visiting Physician

T. N. Blades, M.R.C.S. (Eng.) , L.R.C.P. (Lond.)



### Part III. LEGAL

#### ABOLITION OF GENERAL BOARD OF HEALTH

The functions of this Board in respect to all matters dealt with in the Public Health Act, 1954 were assigned to the three Local Government Councils in 1959.

The last function for which the Board remains responsible is the examination followed by approval or rejection of applications for the division and sale of land.

This department wishes to place on record its appreciation of the excellent advice which this Board has on many occasions given to the Directors of Medical Services.

### Part IV. VITAL STATISTICS

The population on the 31st December, 1961, was computed as follows:—

Estimated population, 31st December, 1960	..	..	232,331
Excess of births over deaths	..	..	<u>4,344</u>
			236,675
Less excess of Emigration over Immigration	..	..	<u>4,963</u>
Population at 31st December, 1961	..	..	<u>231,712</u>

	Males	Females	Persons
Immigration .. ..	31,349	22,785	54,134
Emigration .. ..	36,114	22,983	59,097
Arrivals by air .. ..	—	—	46,381
Departures by air .. ..	—	—	50,817

Tables showing the causes of Death in each parish in age-groups are printed in the Appendices.

Vital statistical data for the year ending 31st December, 1961 are as follows:—

Estimated end of year population	..	..	231,712
Estimated mean population	..	..	232,021
Births registered	..	..	6,754
Birth rate per 1,000 of the population	..	..	29.0
Deaths registered	..	..	2,410
Deaths per 1,000 of the population	..	..	10.4
Infant Mortality Rate	..	..	84
Maternal Mortality Rate per 1,000 live births	..	..	2.20
Still birth rate per 100 live births	..	..	2.12

Vital statistical data over the ten year period 1952-61:

Year	Natural Increase Population	Birth Rates	Crude Death Rates	Infant Mortality Rate	Maternal Mortality Rate
1952 .. ..	4,105	33.59	14.68	146	3.08
1953 .. ..	4,307	33.05	13.36	139	3.49
1954 .. ..	5,032	33.63	11.29	109	2.71
1955 .. ..	4,706	33.14	12.60	134	2.59
1956 .. ..	4,652	30.88	10.59	97	3.39
1957 .. ..	4,845	31.69	10.69	87	2.19
1958 .. ..	4,817	30.34	9.80	82	2.95
1959 .. ..	5,026	29.77	8.73	71	2.25
1960 .. ..	5,703	33.50	8.82	60	2.17
1961 .. ..	4,344	29.00	10.40	84	2.20

A figure of 84 for the Infant Mortality Rate is disappointing, in that it registers the only failure to advance in the past six years.

A very careful analysis of the probable causes of this set-back has been made, but no satisfactory explanation can be given for the over-all slight increase in deaths from *all* causes, in *all* parishes, over the whole year.

It may however be associated with the sharp rise in the preceding year.

Comparison of the rates with those recorded in neighbouring territories:

Rate	Barbados	Trinidad	Jamaica
Births per 1,000 population .. ..	29.0	—	40.99
Deaths per 1,000 population .. ..	10.4	—	8.80
Infant Mortality per 1,000 live births ..	84	—	47.15

## Part V. HEALTH AUTHORITIES

The Health Authorities established under the Public Health Act, 1954 are:

- (a) The Bridgetown City Council;
- (b) The Northern District Council;
- (c) The Southern District Council.

Each Council has a Medical Officer of Health and a Chief Public Health Inspector nominated for the Council by the Central Government.



## Part VI. REPORT OF THE GOVERNMENT CHIEF PUBLIC HEALTH INSPECTOR

*W. A. Abrahams, Esq., M.R.S.H.*

The Report of the work done by the Inspectors Department during the period April 1, 1961, to March 31, 1962, is hereunder submitted for your information:

Sections of the Department are as follows:

The Inspection Field Force,  
The Aedes aegypti Eradication Units,  
The Maritime and Airport Staffs.

The Aedes Aegypti Mosquito Eradication Programme took precedence over the other phases of the work which the Department has always undertaken. During the first quarter of the year approximately seventy-eight (78) localities were worked in the three Areas of the Island. Sixty-two (62) were completed, and thirty-three (33) of these localities were found negative.

Immediately after this period there was a change in the administration on this project. The former Sanitarian-Consultant, Mr. Dennis Rausch, having resigned from the World Health Organization, his place was taken by Mr. C. D. Gilkes.

Another change instituted was the appointment of three Chief Public Health Inspectors, each being responsible to the Department for the co-ordinating of work done by the Department's Staff and that done by the Staffs employed by the Local Government Councils, with a view to intensifying the campaign against this mosquito.

Under the new Consultant's direction other measures for the eradication of this mosquito were put into effect, and it was this that led to the discovery that localities previously regarded as negative had again become reinfested.

The drive against the mosquito continues unabated, but regrettably the question of non co-operation, or the partial co-operation of certain sections of the community, are problems which still confront us. Efforts have been made to try and obtain permission for an increase in the number of personnel now engaged in order that the present cycles now obtaining, may be shortened.

### Quarantine and Port Sanitation

In the Port Area (Carlisle Bay and Bridgetown Harbour) routine inspection of premises, in the port area generally, is carried out daily. The general sanitation of the Ports continues to be satisfactory. Mosquito infestation, one of the numerous phases of work done in this area is given priority and reports are submitted daily to the Port Health Officer. All efforts are made to ensure that both the Maritime Ports and the Airport are kept mosquito free.

### Rodent Control in Ports

A team of three men has been allocated to the Port Area and these men carry out daily visits to buildings in the area, and also to buildings in the immediate environs of the Port. Rodent infestation is kept under control in the Port Area.

Four hundred and nine (409) vessels, mainly schooners, motor vessels and other surface craft arrived from the neighbouring West Indian and other islands during the year. Three hundred and fifty-one (351) were treated with mortex insecticide on arrival. Two of these were found with Aedes aegypti mosquitoes on arrival. They were treated and reports were forwarded to the Port authorities, both in the ports of origin and final destination.



Residual spraying operations were carried out on twenty-two (22) vessels, while two vessels were fumigated during the same period. Rat baits were laid aboard fifteen vessels after it was found impracticable to carry out fumigation operations.

During the period under review seventy-three thousand four hundred and sixty-four (73,464) baits were laid. Nine thousand three hundred and fourteen (9,314) rats, and two thousand five hundred and seventy-four (2,574) mice were certified to have been destroyed in and around the City and suburbs of Bridgetown.

### Miscellaneous

Under this head, public health officers attached to the staff carried out water sampling operations at several places – private and public.

Samples of water supplies were regularly taken from public standpipes, the Airport and the Maritime Port and the Pumping Stations. The reports from the Bacteriological Laboratory at the Enmore Health Centre were subsequently submitted to the Department.

Inspection of premises and areas from which cases of notifiable diseases had been reported, was also undertaken and reports on these were submitted to the Department and also to the Local Public Health Authorities concerned.

Nuisances and other complaints reaching the department were dealt with as expeditiously as possible, and wherever practicable, remedial measures were suggested and in some cases instituted with the minimum of delay.

### THE PUBLIC HEALTH LABORATORY – HEALTH CENTRE, ENMORE

Fifty-two thousand, two hundred and forty-nine (52,249) tests were performed in the Public Health Laboratory. This represents an increase of seven thousand and thirteen (7,013) over the tests performed during the previous year. This is a clear indication of the continual progress being made in this Laboratory, established just four years ago.

Weekly visits are paid to the Speightstown and St. Philip Health Centres and Laboratory services rendered for their Diabetic and Ante-Natal Clinics respectively. Laboratory technicians make weekly collections of blood samples for serological tests, from patients of the Maternity Ward of the Bridgetown Infirmary.

Specimens for Serological, Bacteriological and Haematological Examinations are received from the Maternity Hospital, Bridgetown Infirmary, the three Health Centres and General Practitioners, and considerable numbers of serological tests are performed on prospective emigrants to Canada, the United Kingdom and the United States of America and for the General and Mental Hospitals; the Public Health Laboratory is now performing serological tests for the entire island. Similarly, T.B. Cultures and Sensitivity tests for the entire island are done in the Laboratory and Parasitology tests performed on Canadian Emigrants.

The Bacteriological examination of water continues to feature prominently in the Public Health Laboratory's routine work. Samples from all reservoirs and pumping stations are tested monthly, and from Seawell Airport weekly. Sampling of water from the water-boat enclosure and the Pierhead, was also instituted.

### Staff

In August, Mr. Victor Archer proceeded on leave prior to resigning from the post of Laboratory Supervisor in early July.

Mr. C. Best continues his studies for the Associateship of Institute of Medical Laboratory Technology, in England. He successfully took the Intermediate of this Examination in May.

Mrs. G. M. E. Sealy has been acting as Laboratory Technician from April.

# TOTAL WORK PERFORMED IN 1961

## ENMORE HEALTH CENTRE

<i>Bacteriology:</i>					<i>Positive</i>	<i>Negative</i>	<i>Total</i>
Smears for G.C.	..	..	..	..	984	1,701	2,685
Cultures for G.C.	..	..	..	..	29	1,234	1,263
Direct and Concentrated Smears for T.B.	..			..	40	249	289
Cultures for T.B.	..	..	..	..	32	121	153
Sensitivity tests for T.B.	..	..	..	..	—	—	99
Routine Sensitivity tests	..	..	..	..	—	—	204
Other Cultures	..	..	..	..	—	—	2,210
Smears for Diphtheria	..	..	..	..	—	91	91
Cultures for Diphtheria	..	..	..	..	—	91	91
Darkfield Examinations for Treponema Pallidum					23	142	165
Smears for Donovanias granulomatis	..	..	..	..	2	1	3
							<u>7,253</u>

<i>Haematology:</i>					<i>Positive</i>	<i>Negative</i>	<i>Total</i>
Haemoglobin Estimations	..	..	..	..	—	—	1,825
Erythrocyte Sedimentation Rate	..	..	..	..	—	—	21
White Blood Counts	..	..	..	..	—	—	62
Red Blood Counts	..	..	..	..	—	—	51
Differential White Blood Counts	..	..	..	..	—	—	40
Eosinophil Counts	..	..	..	..	—	—	1
Packed Cell Volume	..	..	..	..	—	—	366
Sickle Cell Preparations	..	..	..	..	8	39	47
Paul — Bunnell	..	..	..	..	—	—	1
Blood Morphology	..	..	..	..	—	—	2
							<u>2,416</u>

<i>Parasitology:</i>					<i>Positive</i>	<i>Negative</i>	<i>Total</i>
Direct Smears for Ova	..	..	..	..	199	486	685
Trichomonas Vaginalis	..	..	..	..	385	810	1,195
Smears for Filaria	..	..	..	..	—	2	2
Smears for Malaria	..	..	..	..	—	3	3
							<u>1,885</u>



# ENMORE HEALTH CENTRE — *Continued*

<i>Urinalysis:</i>										<i>Total</i>
Sugar	..	..	..	..	..	..	..	..	..	594
Albumin	..	..	..	..	..	..	..	..	..	2,003
Microscopic	..	..	..	..	..	..	..	..	..	68
General Examinations			..	..	..	..	..	..	..	72
Bile	..	..	..	..	..	..	..	..	..	8
Reaction	..	..	..	..	..	..	..	..	..	49
Specific Gravity		..	..	..	..	..	..	..	..	32
Acetone	..	..	..	..	..	..	..	..	..	3
										<hr/> 2,829 <hr/>
TOTAL ENMORE HEALTH CENTRE										.. .. 14,383

# SPEIGHTSTOWN HEALTH CENTRE

<i>Bacteriology:</i>						<i>Positive</i>	<i>Negative</i>	<i>Total</i>
Direct Smears for G.C.	...	..	..			1	4	5
Darkfield examinations for T. Pallidum			..			—	2	2
								<hr/> 7 <hr/>

<i>Haematology:</i>										
White Blood Counts	..	..	..	..	..	..	..	..	..	8
Red Blood Counts	..	..	..	..	..	..	..	..	..	5
Differential White Blood Counts			..	..	..	..	..	..	..	5
Haemoglobin estimations	..	..	..	..	..	..	..	..	..	8
										<hr/> 26 <hr/>

<i>Urinalysis:</i>										
Sugar	..	..	..	..	..	..	..	..	..	1,788
Microscopic	..	..	..	..	..	..	..	..	..	3
Albumin	..	..	...	..	..	..	..	..	..	1
										<hr/> 1,792 <hr/>
TOTAL SPEIGHTSTOWN HEALTH CENTRE										.. .. 1,825

# SIX CROSS ROADS HEALTH CENTRE

<i>Bacteriology:</i>						<i>Positive</i>	<i>Negative</i>	<i>Total</i>
Smears for G.C.	..	..	..	..	..	—	1	1
Cultures for G.C.	..	..	..	..	..	—	1	1
								<u>2</u>

<i>Haematology:</i>								
Haemoglobin estimations	..	..	..	..	..	..	..	609
Red Blood Counts	..	..	..	..	..	..	..	2
White Blood Counts	..	..	..	..	..	..	..	2
Differential White Blood Counts		..	..	..	..	..	..	2
								<u>615</u>

<i>Parasitology:</i>						<i>Positive</i>	<i>Negative</i>	<i>Total</i>
Direct Smears for Ova	..	..	..	..	..	—	1	1
								<u>1</u>

<i>Urinalysis:</i>								
Sugar	..	..	..	..	..	..	..	787
Albumin	..	..	..	..	..	..	..	787
Acetone	..	..	..	..	..	..	..	1
								<u>1,575</u>

TOTAL SIX CROSS ROADS HEALTH CENTRE 2,193

TOTAL (3) HEALTH CENTRES .. 18,401

<i>Water Examination:</i>								
Millipore Filter Method	..	..	..	..	..	..	..	988

<i>Serology:</i>								
V.D.R.L. — Qualitative	..	..	..	..	..	..	..	24,374
V.D.R.L. — Quantitative	..	..	..	..	..	..	..	5,707
Kolmer — Wasserman	..	..	..	..	..	..	..	2,730
V.D.R.L. on C.S.F.	..	..	..	..	..	..	..	49
Total Serology:				..	..	..	..	<u>32,860</u>

GRAND TOTAL .. 52,249



SEROLOGY

Result	St. Michael's Health Centre	%	St. Philip's Health Centre	%	Speightstown Health Centre	%	Emigration	%	Maternity Hospital	%	Bridgetown Infirmary	%	General Hospital	%	Mental Hospital	%
Negative	7,939	75.8	3,000	78.0	2,338	83.8	3,204	91.4	649	87.6	228	85.4	1,865	81.3	390	85.5
Reactive	1,725	16.5	560	14.6	299	10.7	224	6.4	63	8.5	25	9.4	307	13.4	46	10.1
Weakly Reactive	810	7.7	285	7.4	153	5.5	78	2.2	29	3.9	14	5.2	123	5.3	20	4.4
Total	10,474		3,845		2,790		3,506		741		267		2,295		456	

Total Negative	..	..	..	19,612
Total Reactive	..	..	..	3,249
Total Weakly Reactive	..	..	..	1,512
Total Qualitative	..	..	..	24,374
Qualitative	..	..	..	24,374
Quantitative	..	..	..	5,707
Wasserman	..	..	..	2,730
C.S.F.	..	..	..	49
TOTAL SEROLOGY	..			32,860

## Part VII. INSTITUTIONS AND HEALTH CENTRES

### THE GENERAL HOSPITAL

*Dr. H. McD. Forde, Medical Superintendent*

*W. C. Goodman, Esq., M.B.E. — Steward & Secretary*

*Miss E. Walters, Matron*

*Miss E. Maxwell, Medical Records Officer*

At the end of the period under review the staff of the Medical Records Department was as follows:

#### The Records Officer

Casualty Section	— 2 Temporary Clerks
Appointment Section	— 2 Temporary Clerks
Admissions Section	— 2 Temporary Clerks
Library Section	— 2 Temporary Clerks
Medical Stenography	— 1 Temporary Stenographer
Medical Statistics	— 1 Female Clerk

#### In-Patients

The statistical data which have been set out in Table "A" describe the use which has been made of the available beds.

The number of patients admitted and discharged has decreased by 1.5 and 2.1 respectively. The average number of daily admissions and discharges has also decreased by one patient. The average daily number of occupied beds for this period under review shows a decrease of 10 below the 1960–61 average.

TABLE "A"

*Statistical Analysis of In-Patients*

	1960–61	1961–62	%
Total fixed Bed Complement .. ..	453	453	
Average Daily No. of occupied beds and cots .. ..	391	381	
No. of In-patients at beginning of annual period .. ..	408	378	
No. of In-patients at end of annual period	378	394	
No. of In-patients admitted during annual period .. ..	10,651	10,482	Decr. 1.5
No. of In-patients under treatment during annual period .. ..	11,059	10,860	
No. of In-patients discharged during annual period including Hospital deaths	10,721	10,500	Decr: 2.1
Average No. of patients resident daily	391	381	
Daily average admissions .. ..	29	28	
Daily average discharges .. ..	29	28	

N.B. This average includes patients admitted in excess of the fixed bed complement of 453 beds.

#### In-Patient Waiting List

The total number on the waiting list at the end of the period amounted to 1,454 patients as compared with 1,090 patients at the end of the previous year: an increase of 33.9 percent. Cases admitted directly from the waiting lists totalled 694 as compared with the previous year's number 919. Many waiting list cases are still having their admissions delayed especially in the E.N.T. division. The emergency cases which are



admitted directly from Casualty or from the Clinics on the same day of attendance also retard some of the admissions from the waiting list.

TABLE "B"

Division	At 31st March, 1961		At 31st March, 1962		At 31st March,	
	Male	Female	Male	Female	1961	1962
					Total	Total
General Medicine ..	2	10	—	—	12	—
Paediatrics .. ..	45	8	45	4	53	49
General Surgery ..	263	352	435	389	615	824
Gynaecology .. ..	—	277	—	403	277	403
E.N.T. .. ..	56	77	70	93	133	163
Ophthalmology ..	—	—	3	12	—	15
Totals ..	366	724	553	901	1,090	1,454

Admissions and Discharges in their Various Specialities

The figures in this table show the cases admitted and discharged in their various specialities for the period under review. There has been an increase in the cases admitted to four of these Specialities:—

General Medicine  
Paediatrics  
General Surgery  
Nursery

while in the other divisions their admissions show a decrease.

TABLE "C"

Division	Available Beds Cots & Bassinettes		No. of Cases Admitted		No. of Cases Discharged	
	1960–61	1961–62	1960–61	1961–62	1960–61	1961–62
General Medicine ..	106	106	2,711	2,717	2,432	2,356
Tuberculosis .. ..	40	40	46	43	66	57
Paediatrics .. ..	38	38	1,175	1,329	1,142	1,219
General Surgery ø ..	143	ø 143	3,429	3,472	3,141	3,174
Ophthalmology ..	27	27	451	432	468	432
Orthopaedics .. ..	30	30	390	352	407	295
Police Ward .. ..	4	4	—	—	—	—
E.N.T. .. ..	—	—	339	213	370	240
Gynaecology .. ..	—	—	1,238	1,033	1,252	1,095
Obstetrics .. ..	9	9	806	798	810	787
Nursery .. ..	10	10	66	93	35	42
Pay Wards "A", "E", "D", Ter.B, Ter.C.	46	46	*	*	*	*
Totals:	543	543	10,651	10,482	10,123	9,797

N.B. \* The number of cases admitted were 1,325; discharged 1,396 as compared with 1,470 admitted; 1,491 discharged for the previous years.

ø Including Gynaecology, Ear, Nose and Throat.

The table "D", following, shows a further breakdown and sex classification of the number of cases admitted for the period under review.

**TABLE "D"**  
*Sex Classification*

Division				Male Patients		Female Patients	
				1960-61	1961-62	1960-61	1961-62
General Medicine	..	..	..	1,483	1,392	1,227	1,325
Paediatrics	..	..	..	693	774	482	555
Skin	..	..	..	—	—	1	—
T.B. Ward	..	..	..	28	19	18	24
General Surgery	..	..	..	1,823	1,606	1,606	1,866
Orthopaedic	..	..	..	252	248	138	104
E.N.T.	..	..	..	142	89	197	124
Ophthalmology	..	..	..	215	223	234	209
Gynaecology	..	..	..	—	—	1,240	1,033
Obstetrics	..	..	..	—	—	806	798
Nursery	..	..	..	36	42	30	51
Totals	..	..	..	4,672	4,393	5,979	6,089

**TABLE "E"**  
*Classification of Births*

Division				1960-61	1961-62	Percentage
Live Births	..	..	..	647	602	decr: 7.4
B.B.A.	..	..	..	9	18	incr: 100.0
Still Births	..	..	..	89	92	incr: 3.3
Twin Births	..	..	..	21	13	decr: 61.5
Triple Births	..	..	..	1	1	— —

**TABLE "F"**  
*Casualty and General Practitioners' Services*

Division	New Cases			Old Cases		
	1960-61	1961-62	%	1960-61	1961-62	%
Medical and Surgical	23,816	16,520	Decr: 44.1	55,582	79,632	Incr: 43.2
Paediatrics	9,903	7,376	Decr: 34.2	23,395	16,195	Decr: 44.4
Diabetes	70	82	Incr: 17.1	15,789	11,687	Decr: 35.0
Totals	33,789	23,978	Decr: 40.9	94,766	107,514	Incr: 13.4

**TABLE "G"**

Division	New Cases			Old Attendances		
	1960-61	1961-62	%	1960-61	1961-62	%
Medicine	445	700	Incr: 5.6	2,833	5,596	Incr: 97.5
Surgery	5,841	5,112	Decr: 14.2	11,554	13,102	Incr: 13.3
Totals	6,286	5,812	Decr: 8.1	14,387	18,698	Incr: 29.9

Other analyses of the figures for the various specialities as shown in Tables "H" and "I" indicate where the increases and decreases in new cases and attendances have taken place.



Attendances were 5,596 as compared with 2,833 in the previous period, an increase of 97.5 percent. New patients were 700, an increase of 5.6 percent on the previous total of 445.

Division of Medicine

TABLE "H"

Division of Medicine	New Cases			Old Attendances		
	1960-61	1961-62	%	1960-61	1961-62	%
General Medicine ..	445	700	Incr: 5.6	2,833	5,596	Incr: 97.5
Dermatology .. ..	-	-	Incr: -	-	-	Incr: -
Total	445	700	Incr: 5.6	2,833	5,596	Incr: 97.5

Division of Surgery

There has been a decrease in the totals of new cases treated, while attendances show an increase in comparison to the totals shown for the corresponding period 1960-61. Attendances were 13,102 as compared with 11,554 in the previous period, an increase of 13.3 percent. New patients were 5,112, a decrease of 14.2 percent on the previous total of 5,841.

TABLE "I"

Division of Surgery	New Cases			Old Attendances		
	1960-61	1961-62	%	1960-61	1961-62	%
General Surgery ..	2,204	2,185	Decr: 0.8	4,744	5,060	Incr: 6.6
Orthopaedic ..	712	472	Decr: 50.8	1,808	1,620	Decr: 11.6
E.N.T. .. ..	953	728	Decr: 30.9	193	294	Incr: 52.3
Ophthalmology ..	1,163	1,089	Decr: 6.7	2,884	3,490	Incr: 21.0
Dental .. ..	736	558	Decr: 31.8	1,752	1,866	Incr: 6.5
Ulcer .. ..	73	80	Incr: 9.5	173	772	Incr: 346.2
Total ..	5,841	5,112	Decr: 14.2	11,554	13,102	Incr: 13.3

Waiting List of Out-patient Department

At the first of April, 1962, a total of 187 patients were on the active list of cases waiting to be seen in the clinics and of this total 67 were male and 120 female patients. The period of waiting was:-

Under one month	..	159 patients
Between one to two months	.. ..	28 patients.



TABLE "J"

Speciality	Male	Female	Total	Under 1 month	1-2 months
Medical .. ..	—	1	1	1	—
Diabetic .. ..	—	—	—	—	—
Skin .. ..	—	—	—	—	—
Paediatric .. ..	—	—	—	—	—
General Surgery .. ..	17	28	45	35	10
Ophthalmology .. ..	11	12	23	23	—
E.N.T. .. ..	12	18	30	30	—
Orthopaedic .. ..	—	—	—	—	—
Gynaecology .. ..	—	—	—	—	—
Dental .. ..	27	60	87	69	18
Ulcer .. ..	—	1	1	1	—
Total .. ..	67	120	187	159	28

Hospital Deaths

The total number of deaths for the year has increased by 16.4 percent with a Mortality Rate of 6.6 as compared with 5.6 in the previous period, and an average days stay of 14 the same as for the corresponding period 1960-61. There has also been a significant increase by 119.0 percent in the total of Nursery deaths.

TABLE "K"

Classification of Hospital Deaths

Division	1960-61	1961-62	%
General Medicine .. ..	284	346	Incr: 21.8
Paediatrics .. ..	73	101	Incr: 38.3
Skin .. ..	—	—	—
T.B. Ward .. ..	8	5	Decr: 60.0
General Surgery .. ..	137	143	Incr: 4.3
Orthopaedic .. ..	11	16	Incr: 45.4
E.N.T. .. ..	1	1	—
Ophthalmology .. ..	1	—	—
Gynaecology .. ..	1	3	Incr: 200.0
Maternal .. ..	13	9	Decr: 44.4
Nursery .. ..	21	46	Incr: 119.0
Neo-Natal .. ..	48	33	Decr: 45.4
Casualty .. ..	21	18	Decr: 16.6
Total .. ..	619	721	Incr: 16.4

Deaths Associated with Anaesthesia

These deaths have not increased but remain the same as for the corresponding period 1960-61.

	1960-61	1961-62	%
Deaths associated with Anaesthesia	5	5	-

There has been a decrease in the number of deaths within 24 hours of admission, and of this number 47 were Coroner's inquests.

	1960-61	1961-62	%
Deaths within 24 hours of Admission	136	134	Decr: 1.4

Perinatal Mortality

A combination of the totals of stillbirths and neonatal deaths shows that the perinatal mortality for the period under review has decreased by 9.6 percent. The still-birth rate shows an increase of 3.3 percent although there has been a decrease in the number of births for this period.

TABLE "L"  
Perinatal Deaths

	1960-61	1961-62	%
Still-births	89	92	Incr: 3.3
Neo-Natal	48	33	Decr: 45.4
	137	125	Decr: 9.6

Operations

The total number of hospital operations (Major, Minor, and Eye) has decreased by 9.6 percent. The previous year's total was: Major and Minor - 4,806 as compared with 4,562; Eye - 228 as compared with 217. The daily average number of operations (In-Patients) was 13 as compared with 14 for the previous year, and (Out-Patients) 3.

TABLE "M"  
Operating Theatres

	1960-61	1961-62	%
In-Patient (including eyes)	5,034	4,779	Decr: 5.3
Out-Patient	1,486	1,165	Decr: 27.5
Total	6,520	5,944	

Physiotherapy

The total number of treatments and attendances is 359 for the period under review as compared with 433 for the previous year. The number of new treatments has increased by 14.9 while the old attendances show a decrease of 40.0 percent.

**TABLE "N"**  
*Physiotherapy Department*

	New Treatment			Old Attendances		
	1960-61	1961-62	%	1960-61	1961-62	%
In-Patient .. ..	97	65	Decr: 49.2	113	42	Decr: 62.8
Out-Patient .. ..	84	143	Incr: 70.2	139	109	Decr: 21.5
Total .. ..	181	208	Incr: 14.9	252	151	Decr: 40.0

While it might be stated that the record of the number of persons attending the Casualty and the various clinics of the hospital has shown an upward trend, it is to be pointed out that the new cases have shown a decrease. The increase has been caused by the number of old cases who perhaps by becoming more and more conscious of the facilities given at the hospital are returning for treatment in ever increasing numbers.



## THE MENTAL HOSPITAL

*Dr. R. M. Lloyd-Still, O.B.E., Medical Superintendent*

### Population

The total number of patients in residence on 31st December, 1961, was 770 (302 males and 468 females) as against 762 (296 males and 466 females) in 1960.

The average number in residence during the year was 749 (289 males and 460 females) as against 748 (289 males and 459 females) in 1960.

The highest number recorded during the year was 775 as against 776 on 13th November, 1960, and the lowest 739 on 30th April, 1961, as against 748 in 1960. 611 patients (287 males and 324 females) of whom 54 (8.8%) were certified; 126 (20.6%) voluntary; 391 (63.9%) temporary; 41 (6.71%) were sent from the Courts under observation, were admitted during the year as against 551 in 1960 (258 males and 293 females) of whom 72 (13.1%) were certified; 109 (19.8%) voluntary; 342 (62.1%) temporary; 28 (5%) sent from the courts for observation.

547 patients (250 males and 297 females) were sent out during the year, as against 496 (225 males and 271 females) in 1960. The number comprises 197 permanently discharged, 89 discharged after a trial period of usually two to three months, 89 who were afterwards returned from trial, 35 sent from the Courts for observation. 137 patients were still out on trial at the end of the year, of the 41 patients who were sent for observation, 6 were later certified and 4 were still under observation at the end of the year.

The number of deaths were 56 (23 males and 33 females) as against 53 (16 males and 37 females) in 1960.

The main causes of death were:—

1961		1960	
Myocardial Degeneration & Arterio-Sclerosis	27	Myocardial Degeneration & Arterio-Sclerosis	25
Cerebral Haemorrhage	2	Cerebral Haemorrhage	3
Sub-Acute Enteritis	2	Pulmonary T.B.	3

### Health

The general health of the patients continues to be satisfactory. Routine X-rays are continuing to be carried out at Enmore Health Centre, but no new cases of Pulmonary Tuberculosis were discovered.

The number of deaths was higher than the previous year. The majority of the deaths occurred amongst the elderly population. The average age was 65 (63 in 1960).

The number of deaths which took place during the last ten years was as follows:—

1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961
64	60	58	35	44	52	49	53	46	53	56

### Staff

Dr. J. T. Murray-Aynsley, who was formerly on the staff of this Hospital, was reappointed to the post of Assistant Medical Superintendent on two (2) years' contract with effect from 18th September, 1961.

Mr. V. C. Boyce, Steward, proceeded to the United Kingdom on 19th March, 1961, to undergo a course in Hospital Administration. He returned to the island on 1st August, 1961.

Mr. Colton Bennett was appointed Tutor with effect from 5th February, 1962, in place of Mr. Dermot Nugent whose contract had expired.

Mr. Rawle Springer was promoted to the post of Assistant Head Male Nurse with effect from 1st November, 1961.

Accommodation

For the accommodation of patients there are 35 dormitories holding 380 beds and 417 single rooms, (321 males and 476 females) (Total Accommodation 797).

Treatment

Physical methods, *i.e.* Electro-Convulsive Therapy and Modified Insulin Coma continue to be used with success, although on a reduced scale due to the increased use of tranquillizing drugs and also the tranquillizing effect of the open-door and Occupational Therapy – Modified Insulin Sub-Coma, daily for two months, has been found particularly useful for treating alcoholics and some good results have been obtained. They are more receptive to follow-up psychotherapy and Alcoholics Anonymous. Although many different tranquillizing drugs have been tried out the mainstay are still Chlorpromazine and Stelazine, although there was success with Librium, parnate and parstelin. The percentage of positive V.D.R.L. on blood and C.S.F. is the lowest ever recorded.

There were two (2) deaths from Neuro-Syphilis this year. Deaths from Neuro-Syphilis for the past twelve (12) years were as follows:–

1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961
20	13	11	9	7	4	4	3	–	2	3	2	2

This was the major cause of deaths twelve years ago.

		1961	1960
Male V.D.R.L. Test on Blood	– 244		
Positive Blood	– 46	10.8%	12.9%
Male Test on C.S.F.	– 10		
Positive C.S.F.	– 2	20%	23%
Female V.D.R.L. Test on Blood	270		
Positive Blood	– 50	18.5%	20.4%
Female Test on C.S.F.	– 15		
Positive C.S.F.	– 4	27%	30%

Occupational Therapy

This year has seen a better organised system in the Occupational Therapy Department. A Female Nurse, who, on completion of her R.M.N. in the United Kingdom, took a course in Occupational Therapy, supervises the Handicraft Section. Music and dancing, art classes and bingo are the main features in the evenings. A considerable amount of sewing and other handicraft is also done in the wards. These are very much appreciated by the patients, both male and female.

Recreation

This year has seen further extensions of the patients' recreational facilities.

A group of selected male patients were taken to witness cricket and football matches between the staff and opposing teams.

During the year, Cinema Shows, Police Band Concerts, Salvation Army Concerts, and concerts by other visiting artistes have been staged regularly, and have contributed greatly to the contented attitude of the patients.

More patients than usual were sent to the Annual Industrial Exhibition and there has been a further increase in the number of week-end leaves.

The new feature, Sports Day, in which staff and patients participate, was again successful this year.



## Buildings

No new buildings were erected during the year, but an extension was made to the main office. The usual programme for maintenance and upkeep of existing buildings was carried out.

## Visitors – *Official*

His Excellency the Governor and Lady Stow;  
Honourable Dr. H. G. Cummins, Premier;  
Honourable Mr. DaC. Edwards, Minister of Social Services;  
Dr. M. A. Byer, Director of Medical Services.

## *Unofficial*

Mrs. Isabel Lindsay, Dean, School of Social Work, Howard University;  
Miss Anne Freeman, R.N., Halifax;  
Miss Elaine Harvey, St. Kitts;  
Miss Alice C. Legault, Salem, Virginia, U.S.A.;  
Miss F. Atkinson, Mental Hospital, Trinidad;  
Miss I. Lashley, Dietitian, Mental Hospital, Berbice, British Guiana.

## Remarks

The Canteen that has been projected for the hospital has failed to materialize up to the present but the Red Cross, under the supervision of Mrs. Cochrane, comes to the Hospital every Saturday with drinks, sweets, *etc.* for selling to the patients.

I resigned from the Executive Board of the Caribbean Federation for Mental Health to give way to a younger man who could devote more time and would be for a longer period in the Caribbean and Dr. R. A. J. Webb was elected to the Board.

The Third Caribbean Conference was held in Jamaica in April, 1961, and this was a great success and many delegates attended from the Caribbean and other parts of the world. Dr. Vera Rubin, Director of Research Institute for the Study of Man, gave a talk on her Census findings of 10,000 patients from the Caribbean and a Report of all the Hospitals participating with interesting findings and an individual report of Barbados Mental Hospital has been received.

Mr. V. C. Boyce, the Steward, proceeded to the United Kingdom in March, 1961, to attend a course in Hospital Administration. During his absence Mr. L. C. Donovan acted as Steward.

It will be seen that the number of admissions has reached a new high level record (611) and that the percentage of certified admissions has now come down to 8.8 as against 40.1 in 1952 when the new Mental Health Act came into operation. This is evidence of further recognition of the hospital as a Treatment Centre for mental disorder and an increasing realization on the part of the general public that there should be no stigma. They come to visit their relatives and friends in all the wards and wander around freely.

We extend a hearty welcome to Dr. J. Murray-Aynsley who has returned to the Staff and many thanks are due to members of the male and female staff who have given their co-operation and assistance during the year and particularly to Mr. V. C. Boyce, the Steward and Secretary, who has loyally supported me with the administration of this Hospital.

Further information is given in Appendices XX to XXIII.



THE MATERNITY HOSPITAL

Staff

Miss L. V. Fearon, Matron, completed her two-year contract on the 1st February.

Miss Carmen Blackman, Departmental Sister, General Hospital, was appointed to act as Matron, Maternity Hospital, with effect from 1st March, 1961.

Miss C. Inniss, Nurse Midwife, was promoted to the post of Senior Nurse Midwife with effect from the 28th January, due to the resignation of Miss D. Sargeant, Senior Nurse Midwife on 4th January.

Miss G. Inniss was appointed to the post of Nurse Midwife with effect from the 28th January.

Pupil Midwives

	In Training	Trained Nurse Pupils	Untrained Pupils
From 1st – 31st January ..	20	7	13
From 1st February – 31st July ..	20	9	11
From 1st August – 10th September..	19	8	11
From 11th September – 31st December	20	8	12

January, 1961

Nine pupils (6 trained and 3 untrained) including Miss Naomi Burke, who entered in November, 1960, for a refresher course, sat the final Midwifery Examination.

Examination results:– All passed.

February

Eight partly trained pupils entered for training.

July

Twelve pupils (1 trained and 11 untrained) sat the final Midwifery Examination.

Examination results:– 8 passed and 4 failed.

August

Eleven untrained pupils entered for training.

September

One untrained pupil entered for training on the 11th September.

Family Planning Clinic

The teaching is now given by the Nurse Midwife, as the Family Planning Nurses no longer attend. The material is provided by the Family Planning Clinic.

Baby and Post Natal Clinic

These clinics are well attended.

Statistics

Admissions	...	...	667
Discharges	...	...	641
Deliveries	...	...	578
Multiple Pregnancies (twins)	...	...	5
Premature Births	...	...	38
Baby Clinic attendances	...	...	910
Post Natal attendances	...	...	405

*Statistics – Cont'd.*

Ante-natal attendances	...	5,614
Dental benefits issued...	...	124
Transfers to Barbados General Hospital ...	...	22–16 adults 6 infants

*Reasons for transfer to Barbados General Hospital*

INFANTS

- 1 Exomphalos
- 1 Severe Jaundice
- 1 Imperforate Anus
- 1 Nasal deformity & obstruction
- 1 Cardiac condition and Varus deformity
- 1 Genu recurvatum

ADULTS

- 2 Abortions
- 5 Antepartum Haemorrhage
- 4 Disproportion
- 2 Prolonged labour
- 1 Cardiac failure
- 2 Post partum haemorrhage (same patient twice)

Maternal deaths	...	...	...	None
Neonatal deaths	...	...	...	4

*Causes of death*

- 1 Achondroplasia
- 1 Asphyxia neonatorum
- 2 Prematurity

Stillbirths	...	...	...	13
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*Causes*

- 6 Pre-eclamptic toxæmia
- 3 Prolonged labour
- 1 Compression of presenting cord
- 3 Cause unknown (including 1 non-clinic patient)

Treatment given	...	...	...	207
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*V.D.R.L. Tests*

Positive	73	}	...	...	666
Negative	593				

*Cord bloods*

Positive	28	}	...	...	46
Negative	18				

**General Remarks**

The first presentation of Midwifery Certificates was held on the 1st February, and prizes were presented to pupils for the best examination results in 1960 and 1961.

As a result of repairs being carried out to the Maternity Ward, General Hospital, eleven patients were transferred to this hospital for delivery and post-natal care.



## THE LEPER HOSPITAL

There were eight (8) male and four (4) female patients in the Hospital on the 1st January, 1961. By the end of the year the number of male patients had been reduced to six (6); but the number of female patients remained the same.

The following statistics are of interest:—

Number of patients in residence on 1st January, 1961	12
New Admissions ... ..	—
Re-admissions on compassionate grounds ...	3
Discharges ... ..	2
Re-discharges ... ..	2
Deaths ... ..	1
In residence on 31st December, 1961 ...	10
In residence on 31st December, 1951 ...	33
In residence on 31st December, 1941 ...	57

The causes of the death were —

- (a) Congestive cardiac failure;
- (b) Chronic Glomerulo nephritis; and
- (c) Leprosy.

During the year forty-three (43) discharged patients presented themselves at regular intervals for examinations and remain in good physical condition.

The staff which numbers seventeen (17) were granted leave in accordance with the Leave Regulations 1952.

Mr. C. E. Edwards continued in the post of Superintendent from the 1st January to the 1st July when he was granted one hundred and eighty (180) days' vacation leave. He resumed duty on the 28th December.

Dr. T. N. Blades continued in the post of Visiting Physician throughout the year.

The duties of Chaplain were carried out during this period by the Revd. Father K. F. Hassell.

The matron, Miss V. E. Sealy, continued her studies in nursing in the United Kingdom. From reports submitted by the Matron of the Hospital at which she is undergoing training her progress appears to be satisfactory.

Throughout the year the duties of Matron were carried out by Mrs. E. R. Jules in a satisfactory manner.

Mr. C. H. Riley continued in the post of Steward and Clerk throughout the year and performed the duties of Superintendent during the absence of Mr. C. E. Edwards.

For the Financial Year 1961–62 the expenditure exclusive of Personal Emoluments was as follows:—

Provisions and fuel...	...	\$7,838.07
Clothing and uniform	...	1,772.90
Cleaning, water and light	...	1,057.08
Furniture and bedding	...	360.65
Medicine and dressings	...	1,647.72
Incidentals ... ..	...	774.13
Medical boards ... ..	...	—
Stationery ... ..	...	39.23
Dental Treatment ... ..	...	144.00
Inmate labour ... ..	...	1,704.80
Casual labour ... ..	...	4,010.64
Recreation and handicrafts	...	159.80
Travelling allowance	...	149.52



The average daily cost per head for general maintenance was \$2.08½ and provisions average \$1.65¼ each per day.

Of the sum of \$11,500.00 provided for the after-care of discharged patients a total of \$11,231.68 was expended.

Inmate labour was used for the following:—

Sweeping and cleaning yards, washing in the laundry, sewing, picking fibre and making beds, weeding lawns and gutters, and attending the helpless. The average number so employed was 4.

During the year eight (8) pairs of pants for the patients were made at the Prisons Department.

Garments washed during the period under review numbered 4,762 while those repaired numbered 325.

During the year the female section of the Hospital was re-arranged and the scattered groups of patients and staff were brought closer together in that section. It is hoped that use may soon be found for the very good buildings and beautiful grounds in the male section which is now closed.

## HEALTH CENTRE, ST. MICHAEL

*Dr. L. Harney, Medical Officer of Health*  
*Miss B. Williams, Senior Public Health Nurse*

Dr. L. Harney, Medical Officer of Health, was granted 180 days' vacation leave with effect from 1st November, 1961. Dr. R. A. J. Webb acted as Medical Officer of Health, Enmore, during Dr. Harney's absence.

Total attendances 72,079.

### V.D. Clinics

These are held specifically on Tuesdays and Fridays, but cases are seen on all days with the exception of Thursdays when the Well Baby Clinic stretches the resources of the staff beyond their limits.

Special efforts were made to persuade patients to bring or send their contacts.

Due to staff shortage, no home visiting of contacts was possible nor was any proper contact tracing carried out.

The number of children of both sexes appearing with gonorrhoea or syphilis was noted with considerable concern.

**TABLE I**  
*New Gonorrhoea Attendances*

Month	Male	Female	Total
April .. ..	150	33	183
May ..	182	75	257
June ..	175	58	233
*July ..	118	68	186
August ..	110	58	168
September ..	111	70	181
October ..	139	65	204
November ..	100	50	150
December ..	80	46	126
January ..	76	44	120
February ..	52	37	89
March ..	113	30	143
Total:—	1,406	634	2,040

\*Change to new report. Attendance now listed under gonorrhoea instead of injections.

**TABLE II**  
*V.D.R.L. Tests*

Month	Male	Female	Total
April ..	482	499	981
May ..	572	365	937
June ..	403	392	795
July ..	413	438	851
August ..	503	401	904
September	436	461	897
October ..	527	348	875
November ..	415	344	759
C/F:	3,751	3,248	6,999

TABLE II - *Cont'd.*

Month	Male	Female	Total
<i>B/F.</i>	3,751	3,248	6,999
December ..	292	306	598
January ..	414	316	730
February ..	244	185	429
March ..	342	476	818
Total ..	5,043	4,531	9,574

TABLE III

*New V.D.R.L. Tests*

July, 1961 - March, 1962

Month	MALES			FEMALES			Total % Positive
	No. Tested	No. Positive	% Positive	No. Tested	No. Positive	% Positive	
July ..	301	22	7.3	244	17	6.9	7.2
August ..	383	27	7.04	294	44	14.9	10.4
September ..	301	37	12.2	324	33	10.2	11.2
October ..	389	49	12.5	255	23	9.02	11.2
November ..	327	38	11.6	255	37	14.5	12.9
December ..	211	21	9.9	220	17	7.7	8.8
January ..	293	34	11.6	236	27	11.4	11.5
February ..	167	14	8.3	130	12	9.2	8.7
March ..	237	23	9.7	337	36	10.6	10.2
Total ..	2,609	265	10.15	2,295	246	10.7	10.4

TABLE IV

*Repeat V.D.R.L. Tests*

July, 1961 - March, 1962

Month	MALE			FEMALE			Total % Converted to Negative
	No. Tested	No. Negative	% Con- verted to Negative	No. Tested	No. Negative	% Con- verted to Negative	
July ..	96	16	16.6	77	17	23.4	19.1
August ..	102	18	17.6	95	12	12.6	15.2
September ..	112	23	20.5	105	32	30.4	25.3
October ..	119	19	15.1	74	19	25.7	19.7
November ..	76	12	15.8	78	11	14.1	14.9
December ..	63	18	28.6	74	12	16.2	21.9
January ..	106	15	14.1	71	9	12.6	13.5
February ..	64	13	20.3	48	7	14.5	17.8
March ..	92	13	14.1	115	24	20.8	17.8
Total ..	830	147	18.0	737	143	19.4	18.5

From July onward it is possible to make deductions on the prevalence of syphilis in the community. About 10% of all new attendances at the Clinic were positive and this is true for both males and females. Obviously those coming to the Clinic will be a selected group with a greater probability of having a positive blood, the prevalence then in the community as a whole will be less than 10%. (*See Table III*). This is supported



by a breakdown of the emigrant blood tests. Out of 3,882 tests, 319 were positive giving a percentage of 8.2. This 8% includes weak positives, some of which may in fact be false positives.

An encouraging and unsuspected feature is the high percentage of V.D.R.L. Positives who convert to negative during the year (*See Table IV*). The conversion rate for men is 18% and for women 19%.

Ante-Natal Clinic

First attendances totalled 339 for the year.

The percentage of very young mothers (11–15 years) has dropped slightly from 2% of first attendances in 1958 to 1.5% in 1961. This finding is reversed in the young mother group (16–20) where the percentage is higher in 1961. There is a strange change in the age group with the highest percentage of mothers. In 1961, this occurs in the 26–30 age group, but in 1958 the largest group (30%) occurred in the 21–25 age group to which in 1961 only 19% of mothers belonged.

There is very little change between the habits of the mothers in 1958 and 1961. 31% of all mothers attended at or before the fourth month in 1958 as compared with 34% in 1961. The fifth month remains the most common month for the first attendance.

Age at First Attendance

Month	11–15	16–20	21–25	26–30	31–35	36–40	41–45	Total
April ..	1	9	8	10	7	2	—	37
May ..	—	5	5	12	15	3	4	44
June ..	1	2	3	4	1	3	2	14
July ..	—	11	5	8	7	3	2	36
August ..	1	9	8	9	8	5	—	40
September..	—	9	6	8	4	1	—	28
October ..	—	5	7	5	4	3	—	24
November..	1	8	9	8	8	1	1	36
December..	1	2	2	4	3	1	—	13
January ..	—	3	5	10	4	4	1	27
February ..	—	9	3	5	2	2	—	21
March ..	—	5	5	6	2	1	—	19
Total ..	5	77	66	89	65	29	8	339
Percentage	1.5	22.7	19.4	26.2	19.1	8.6	2.3	

Multiparity

Children	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Mothers	57	49	48	35	25	17	18	12	4	3	4	5	1	1	1	1
Percentage	20.2	17.4	17.0	12.5	8.9	6.04	6.4	4.2	1.4	1.06	1.4	1.7	.35	.35	.35	.35

Period of Gestation at First Attendance

Months ..	3	4	5	6	7	8	9
Mothers ..	27	42	50	41	31	11	3
Percentage ..	13.1	20.5	24.3	20.0	15.1	5.3	1.4

Well Baby Clinic

First attendances totalled 728 which is a very large increase on 1958 when the figure was 469. This clinic is now so large that it has become unwieldy and even the

cancellation of the other services on this day has not served to ease the burden on the nurses. A work check was carried out to see if anything could be done to speed the babies through and as a result of this a second weighing machine was installed in the waiting room.

The number of children being brought in the early months is falling back. In 1958, 36.5% of all first attendances were brought before they were one month old. This is a little disturbing as the number of immunizing injections which should be given involve an early start and, should the children be brought when too old, this might jeopardize the immunization scheme.

The figures showing immunization practices are more disturbing. Although the percentages completing the triple antigen course are much alike (47% in 1958 and 43% in 1961), the percentage of incompleted courses has more than doubled, and in 1961 nearly one-fifth of children starting the course has defaulted before completion. Equally ominous is the very high proportion of children who have refused any immunization at all. In 1961, 39% of all children refused immunization as opposed to only 16% in 1958. The gross figures are no more encouraging, 512 children who attended the clinic during the year failed to start or complete their immunization course. This is more than the total attendances for 1958. Only 290 smallpox vaccinations were done. This is due to a failure in public health education in the Clinic and to a lack of home visits to the defaulters. In both cases proper staffing could effect this very important function of the Clinic in the education of the public both at home and in the Clinic.

Child Health Clinic

Immunization

			Completed	Incomplete	In Progress	Not Started
Triple Antigen	..	..	460	200	110	312
Percentage..	..	..	42.5	18.5	10.1	28.8

Polio

			Number	Percentage
Completed	..	..	135	38
2nd Polio	..	..	148	41.5
1st Polio	..	..	73	20.5

Eye Clinic

Total attendances – 791.

Dental Clinic

Total attendances – 2,068. This service is wholly extraction and is at present limited to children and pregnant women.

Home Visits

Total Visits – 279. This is a drop on the 1958 figure. The reason is shortage of staff.

Mental Hygiene

Total attendances – 27 (from October, 1961). This is a new service designed to maintain as Out-patients persons who would otherwise be likely to require in-patient treatment. Due to staff shortage the essential home visits were much curtailed, and in general only those people willing or able to come to the Health Centre were seen.

When staff permits, psychological testing of adults and children can be carried out, and also intelligence testing of adults and children can be done. Mental Hygiene work requires more time than most other services and the present staff situation denies any efforts other than those taken in this field.



Family Planning

New Cases	—	687
Old Cases	—	2,462

Tuberculosis Clinic

B.C.G. Campaign

Cases Notified	..	..	43	Total Attendances	..	..	832
Cases under observation	..		96	Positives	..	..	429
No. of Contacts checked	..		227	Negatives	..	..	292
				Not Read	..	..	111

Vaccinations

The large number was due to a mass vaccination campaign which was carried out in January – February, 1962 when 20,451 school children and 24,937 of the general public were vaccinated by the Public Health Nurses aided by the District Nurses.

At the peak of this campaign the nurses were vaccinating nearly five thousand persons a day in the City alone.

The large number of primary vaccinations given, again stresses the failure of health education to rid the public of its apathy regarding immunization procedures.

Conclusions

In general Enmore Health Centre has reached the saturation point. The staff can cope with the present numbers but only with a loss of efficiency and care. Vital functions such as home visiting cannot be undertaken however essential they may be judged whilst the Centre is faced with the numbers attending the Centre itself. There will be time to give an injection, but no time to discover accurately why the injection is needed, nor will there be time to keep accurate records or to reassure the patient.

It is also my opinion that the time has now come for Enmore to go out to the public. The V.D. Clinics although crowded have reached stasis, but is known that huge reservoirs of V.D. abound in children and others who never attend the clinics. The same argument applies if a fuller immunization record for the City is required – the nurses must go out to the people.

In fact no service offered at the Centre can be completed effectively without having the staff available to check defaulters, trace contacts and generally see that these services offered are used fully and efficiently by the community.

Primary and Revaccinations	T.A.B.	Yellow Fever	Tetanus	Diphtheria
60,087	3,164	108	106	80

X-Ray Department

Routine

Total X-Rays	...	...	...	9,148
Miniatures	...	...	7,930	
Large Films	...	...	1,035	

Of the 9,148 persons X-rayed, 3,407 were emigrants.

B.C.G. Campaign

Total X-rays	...	...	...	183
Large Films	...	...	72	...
Miniatures	...	...	111	

Total X-rays for 1960 were 328.



WELL BABY CLINIC

Month	0-1	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12	12-18	Total
April ..	13	23	12	7	5	2	1	1	1	3	-	-	-	68
May ..	22	28	14	9	4	3	-	-	1	-	-	-	-	81
June ..	15	21	9	7	4	1	2	-	-	1	-	-	-	64
July ..	7	21	5	4	1	-	3	1	1	-	-	-	-	44
August ..	8	26	13	3	1	2	1	1	1	-	-	-	-	56
September ..	20	15	11	6	3	2	2	-	-	1	-	-	-	60
October ..	10	29	6	6	4	2	1	-	-	-	-	-	1	59
November ..	11	24	15	8	1	2	2	-	1	-	-	1	-	65
December ..	2	15	6	4	-	4	-	1	-	-	-	-	-	32
January ..	13	25	14	10	5	5	2	-	-	1	-	1	-	76
February ..	4	17	7	1	5	1	2	-	-	-	-	-	-	37
March ..	14	38	17	9	1	4	1	1	-	-	-	-	1	86
Total ..	139	286	129	74	34	28	17	5	5	6	-	2	3	728
Percentage..	19.9	39.2	17.7	10.1	4.6	3.8	2.4	.68	.68	.82	-	.27	.41	

B.C.G. FOLLOW-UP PROGRAMME 1961





## HEALTH CENTRE, SPEIGHTSTOWN

*Dr. C. G. Terrell, O.B.E., E.D., Medical Officer of Health*

Dr. R. A. J. Webb continued as Medical Officer of Health in charge of the Health Centre, Northern District until April 24th, when he was transferred to Enmore Health Centre and Dr. C. G. Terrell was reappointed at Speightstown to take his place.

There were no serious epidemics to record, but sporadic outbreaks of influenza occurred at intervals – for the most part of a mild type, but with a definite tendency to more relapses than usual.

### Maternal and Child Health Clinics

The Ante-natal total for the year is 1,059 compared with 1,524 in 1960 and 1,606 in 1959.

For the Child Health Clinic the figure is 3,845 compared with 4,042 in 1960 and 4,150 in 1959.

These figures are disappointing, and it is the first occasion that I have had to record a decline in numbers under these headings in my annual reports on the work of Speightstown Health Centre, although I note that in the one submitted last year by Dr. Webb smaller declines were recorded.

### Venereal Diseases

The number of V.D.R.L. tests showed an increase from 2,588 in 1960 to 2,788 in 1961 and this increase is again partly accounted for by those requiring certificates for emigration.

The total number of positive reactors from this 1961 figure of 2,788 was 501, which works out at the comparatively low percentage figure of 17.9.

The corresponding figures for 1960 being 2,588 with 663 being positive reactors – which gives a percentage figure of 25.6.

There has therefore been a considerable drop in the percentage of positive reactors from 25.6 in 1960 to 17.9 in 1961.

The total number of Syphilis cases show a slight increase at 133 compared with 114 in 1960.

Gonorrhoea cases show a considerable reduction at 128, compared with 293 in 1960 and this is satisfactory. As a matter of interest I can record that as far as the male cases are concerned the history usually revealed the fact that contacts lived in Bridgetown.

### Dental Clinic

The work of the Dental Clinic held twice weekly at the Health Centre continued throughout the year and the number of attendances was 1,950.

### Eye Clinic

The Eye Clinic which is held fortnightly on Thursday afternoon showed a total of 327 attendances for the year, which seems rather a small total and there must be a good deal of leeway to make up before all those awaiting examinations are dealt with.

### Diabetic Clinic

Numbers attending the Diabetic Clinic again increased, and there were 83 names on the 1961 Register.

Although they are given careful instructions about regular attendance for their insulin injections, the attendance of many of them – especially from the more distant places – is often irregular and unsatisfactory.



Despite this the total number of attendances for Insulin injections was 3,653 – which represents quite a large number of injections given, although nothing like the total it should have been if all the patients had returned for the full treatment prescribed.

The attendance every Tuesday morning – which is the special diabetic clinic day – by the Enmore Laboratory Supervisor Technician continued throughout the year and serves a very useful purpose.

Advantage is taken of this for a special weekly check-up urine analysis of all diabetic cases attending, and also any other specimens available.

### Country Clinics

Out Station Clinics have been held regularly throughout the year at Belleplaine, Hillaby and Chimborazo with attendances of 2,064, 1,165 and 1,177 at these respective centres.

### Mental Health Clinic

The Mental Health Service which was started by Dr. Webb in October, 1960 continued during the year with visits to the houses of discharged mental cases by the Nurses as a follow-up of Dr. Webb's instructions, and a few occasional cases reporting at the Health Centre on Monday mornings when Dr. Webb usually visited the Health Centre for this purpose.

### Family Planning Clinic

The Family Planning Clinics were held regularly every Friday afternoon and the total attendances for the year was 589, which compares with 574 in 1960; and of the total of 589, 94 were new cases. The attendances at these clinics numerically is far from satisfactory, and it is most regrettable that more do not take advantage of this valuable service which would be of great benefit to themselves and to the economy of the island as a whole.

### Vaccinations, Inoculations and Immunizations

In the field of preventive medicine work has continued normally, and apart from vaccinations against smallpox, a considerable number of individuals are protected every year against tetanus and typhoid-paratyphoid fever. The routine prophylactic inoculations with triple antigen at the Child Health Clinic have continued as usual and is a valuable contribution in protecting the children against these diseases and is undoubtedly appreciated by the mothers.

I note, however, that the number of these inoculations given in 1961 dropped to 1,003 compared with 1,341 in 1960.

Whenever a case of typhoid fever is reported, all the contacts are at once inoculated at their homes or in the schools and the same applies to the rare cases of poliomyelitis contacts.

In the Statistical Schedule under Immunizations, it will be noted that under the heading 'Completed' there is only one figure shown, and under 'Started but not completed' 363. This is apparently due to the particularly long interval between the second and third inoculations against poliomyelitis and the figures should right themselves in next year's report.

### Home Visits

It is regrettable to record that the figure for Home Visits has fallen considerably to 477, which compares with 1,304 in 1960 and 1,727 in 1959. I am told that the factor chiefly responsible for this is the visits to mental health cases which take very much longer than visits to the homes of all those with normal public health service requirements. Now that for the time being we have been relieved of the responsibility of visits of the mentally afflicted, I hope to see the figure gradually return to normal again.

## STAFF

### Medical Officer of Health

Dr. R. A. J. Webb was in charge of the Health Centre until his transfer to Enmore on April 24, when his place was taken by Dr. C. G. Terrell.

### Chief Public Health Inspector

Mr. L. G. Harris was appointed to the Northern District attached to Speightstown Health Centre and assumed duty on 1st April, 1961. This appointment was a welcome help to me and has undoubtedly been of benefit to the Northern District where it is hoped that we shall be successful in raising public health standards. The appointment has been of value in helping to maintain better contact with Northern District Sanitary Inspectors through their Senior Public Health Inspector with his Headquarters at the Northern District office at Hometown, and Mr. Harris has kept in constant touch with him.

He was to a considerable extent responsible for exposing the deterioration in the *Aedes Aegypti* situation in certain of the parishes of the Northern District and much of his time has been occupied in supervising the work of the special unit assigned to this work.

### Senior Public Health Nurse

Nurse M. Mayers has continued to hold this post during the year.

### Staff Nurse

Nurse M. E. Reade returned from taking the Health Visitors' Course in Jamaica and was successful in obtaining her diploma, and was transferred to Enmore to take over from Nurse A. Barker on 1st August, 1961.

### Stenographer

Mrs. P. M. Edwards continued her duties during the year.

### Messenger

Mr. Rufus Ramsay-Phillips continued his duties during the year.

### Statistical Schedules

The Statistical Schedules showing detailed figures under the various headings are attached.

TABLE I

#### *Infant Clinic*

To show number of occasions on which mothers attended before delivery.

Number of Attendances	1	2	3	4	5	6	7	8	9	10	11
Mothers	56	55	68	46	33	22	8	6	5	5	—

TABLE II

To show age groups to which the expectant mothers belong

Age Group	10-14	15-19	20-24	25-29	30-34	35-39	40-45
Mothers	5	78	82	51	49	26	13



TABLE III

The Result of the V.D.R.L. Tests done for mothers attending this clinic.

Negative	Positive	Test not done
264	40	—

TABLE IV

Live Births		Twins	Abortions	Miscarriages	Still Births
Male	Female				
164	138	2	—	1	3

TABLE V

To show the age/weight of Infants at first attendance

Weight in lbs.	Age (in months) at 1st Attendance							
	1	2	3	4	5	6	7	8+
4	—	—	—	—	—	—	—	—
5	—	—	—	—	—	—	—	—
6	7	5	1	—	—	—	—	1
7	10	6	—	—	1	—	—	—
8	16	5	2	1	—	—	—	1
9	27	19	6	—	—	2	—	2
10	25	31	3	—	—	—	—	1
11	13	32	17	4	1	—	—	2
12	5	31	17	4	2	2	—	1
13	3	14	10	3	3	—	—	1
14	11	16	14	4	2	—	—	1
15	—	2	5	9	3	1	1	3
16	—	2	4	3	2	2	—	7
17	—	1	1	4	4	2	1	5
18+	—	—	1	5	1	2	1	26



# STATISTICAL SCHEDULE

	January	February	March	April	May	June	July	August	September	October	November	December	Total
Patients' Attendances	2,430	2,179	2,050	1,571	2,244	2,339	1,959	1,760	1,449	1,510	1,463	1,009	21,963
Syphilis Cases ..	10	12	18	15	8	10	9	16	11	16	5	3	133
V.D.R.L. Tests ..	282	272	287	206	266	305	246	240	207	201	183	93	2,788
Positive V.D.R.L. Tests ..	51	55	55	46	34	54	43	45	42	44	23	12	501
Gonorrhoea Cases	9	8	8	5	11	12	12	13	12	14	13	11	128
Chancroid Cases ..	—	—	—	—	—	—	—	1	—	—	—	—	1
New Ante-natals ..	27	27	28	20	31	31	30	13	22	37	24	14	304
New Infants ..	78	70	47	42	40	47	56	41	32	28	34	13	528
Vaccinations and Inoculations ..	864	570	443	284	671	1,144	372	281	230	208	259	129	5,453
Insulin Treatment	373	303	347	300	343	365	333	330	283	225	204	247	3,653
D.T.P.P. Immunizations ..	130	94	66	101	83	85	85	96	73	65	61	64	1,003
Home Visits ..	45	45	47	44	42	44	80	24	20	19	39	28	477

## HEALTH CENTRE, SIX CROSS ROADS

*Dr. K. L. Standard, Medical Officer of Health*

### General

The Six Cross Roads' Health Centre is the main centre from which Public Health work in the Southern District was organised.

### Staff

Dr. K. L. Standard, Medical Officer of Health, resigned from the service with effect from 31st October, 1961.

After Dr. Standard's departure, Dr. E. Cochrane, Senior Medical Officer of Health carried out the work at the Oistins and Gall Hill Clinics, while Dr. L. B. Bannister acted as part-time Physician for the clinics at Six Cross Roads, St. Augustine, Kendal and Glebe.

Dr. J. Smith and Dr. T. E. Talma were responsible for the dental clinics at Six Cross Roads.

Dr. C. L. Hutson continued as part-time Visiting Physician for the Venereal Disease and Diabetic Clinics at Six Cross Roads.

Dr. H. N. St. John continued fortnightly Ophthalmic Clinics at Six Cross Roads.

Mr. C. E. Haynes was appointed Chief Public Health Inspector, South, with effect from 1st April 1961.

Nurse I. Jones resumed duty on 15th July, after successfully completing the Health Visitors' Course, Royal Society of Health, at the Public Health School, Jamaica.

Thanks are again owed to the Voluntary Workers, Mrs. H. W. Peebles who gave very valuable help with records, and Miss I. Seale who assisted at all the clinics in the District.

### Clinics

Throughout the year Clinics were held at the following stations as indicated:

Six Cross Roads, St. Philip	— daily
Gall Hill, St. John	— Monday mornings
St. Augustine, St. George	— Wednesday afternoons
Oistins, Christ Church	— Tuesday and Thursday mornings
Kendal, St. John	— Thursday afternoons
Glebe, St. George	— Friday afternoons

### Services

The following are the services given at the various clinics in the district:—

- (i) *Health Education* — This continues to be an important part of the work carried out at all clinics, where the Public Health Nurses give individual and group instruction in all aspects of Public Health work. In addition, from time to time, talks are given by members of the Staff to Community groups in the district.
- (ii) *Ante-natal* — Ante-natal clinics were held weekly at Six Cross Roads and Oistins and fortnightly at the other stations.  
At the clinics all expectant mothers are given a bloodtest for syphilis and treated if necessary. They receive instructions in the hygiene of pregnancy and in infant care. Their progress is regularly checked throughout pregnancy, particularly with regard to blood pressure, albuminuria and weight. They are encouraged to make use of the delivery services in the District.

Table I gives the number of new cases and the attendances for the year 1961.



**TABLE I**  
*Ante-natal Cases*

	Six + Roads	Gall Hill	Kendal	St. Augustine	Glebe	Oistins	Total 1961	Total 1960
New Cases ..	239	45	—	40	58	344	726	426
Attendances ..	1,031	177	—	112	229	1,392	2,941	1,379
Average attend- ance per case	4.3	3.9	—	2.8	3.9	4.0	4.1	3.2

**TABLE II**  
*New Ante-natal Cases by Age Group*

	Under 15	15—19	20—24	25—29	30—34	35—39	40 +	Total
Six + Roads ..	—	53	52	58	42	22	12	239
Gall Hill ..	—	10	9	11	10	3	2	45
Kendal ..	—	—	—	—	—	—	—	—
St. Augustine ..	—	11	18	2	3	5	1	40
Glebe ..	—	11	12	10	15	8	2	58
Oistins ..	4	97	75	72	50	36	10	344
Total 1961..	4	182	166	153	120	74	27	726
Total 1960..	4	105	118	80	65	39	15	426

Table III gives, by age group, the number of ante-natal cases with positive blood tests.

**TABLE III**  
*Ante-natal Cases with Positive S.T.S. by Age Group*

Age Group	Six + Roads	Gall Hill	Kendal	St. Augustine	Glebe	Oistins	Total
No. under 15 ..	—	—	—	—	—	4	4
No. Positive ..	—	—	—	—	—	—	—
% Positive ..	—	—	—	—	—	—	—
No. 15—19 ..	53	10	—	11	11	97	182
No. Positive ..	—	—	—	—	2	2	4
% Positive ..	—	—	—	—	18.2	2.1	2.2
No. 20—24 ..	52	9	—	18	12	75	166
No. Positive ..	5	1	—	2	1	5	14
% Positive ..	9.6	11.1	—	11.1	8.3	6.7	8.4
No. 25—29 ..	58	11	—	2	10	72	153
No. Positive ..	7	1	—	—	—	3	11
% Positive ..	12.1	9.1	—	—	—	4.2	7.2
No. 30—34 ..	42	10	—	3	15	50	120
No. Positive ..	4	3	—	1	1	14	23
% Positive ..	9.5	30.0	—	33.3	6.7	28.0	19.2
No. 35—39 ..	22	3	—	5	8	36	74
No. Positive ..	3	—	—	—	—	6	9
% Positive ..	13.6	—	—	—	—	16.7	12.2
No. 40 + ..	12	2	—	1	2	10	27
No. Positive ..	4	1	—	—	—	1	6
% Positive ..	33.3	50.0	—	—	—	10.0	22.2



TABLE III - *Cont'd.*

Age Group	Six + Roads	Gall Hill	Kendal	St. Augustine	Glebe	Oistins	Total
Total No. ..	239	45	—	40	58	344	726
No. Positive ..	23	6	—	3	4	31	67
% Positive ..	9.6	13.3	—	7.5	6.9	9.0	9.2

It will be noted that of 726 blood tests, 67 or 9.2% were positive; in 1960, of 486 tests, 50 or 10.3% were positive.

The positive cases were all treated and their bloods re-checked later in the pregnancy; they were encouraged to bring their partners for V.D.R.L. investigation.

(iii) *Child Health* — There were 960 new cases registered at the clinics during the year. The total number of attendances was 7,145; these figures compare with 854 new cases and 5,815 attendances in 1960. The figures for each station are shown in Table IV.

TABLE IV

*Child Health Attendances*

	Six + Roads	Gall Hill	Kendal	St. Augustine	Glebe	Oistins	Total 1961	Total 1960
New Cases ..	285	117	11	86	116	345	960	854
Attendances ..	2,206	781	181	820	939	1,888	7,145	5,815

(iv) *Immunization* — Immunization against Smallpox and with Triple Antigen (Diphtheria, Pertussis and Tetanus) was carried out at all clinics in the District throughout the year. Primary Vaccinations against smallpox numbered 642, while 608 revaccinations were carried out. The majority were in infants attending the Child Health Clinics, but a small number was in adults who proposed emigrating from the island. Of the 960 new cases seen at the Child Health Clinics, 357 completed the course of Triple Antigen, 306 started but did not complete the course during the year, while 297 did not start the course. The reasons for failing to complete or to start the course were, in the vast majority of cases, either a late start precluding completion before the year's end or postponement because of ill health. Very few cases of refusal were encountered.

In addition to the above, 223 children were given the first, 214 the second, and 78 the third dose of polio vaccine.

(v) *Screening for Syphilis* — During the year 2,987 blood samples from new cases and 718 from repeat cases were examined by the V.D.R.L. test; of the former 282 or 9.4% and of the latter 557 or 77.6% were reactive. Details as shown in Table V.

TABLE V

*Blood Tests for Syphilis*

Centre	New Cases			Repeat Cases			Total		
	No.	No. Pos.	% Pos.	No.	No. Pos.	% Pos.	No.	No. Pos.	% Pos.
Six + Roads ..	1,061	71	6.7	295	220	74.6	1,356	291	21.5
Gall Hill ..	400	33	8.2	166	145	87.9	566	178	31.4
Kendal ..	30	1	3.3	20	19	95.0	50	20	40.0
St. Augustine ..	223	15	6.7	64	52	81.3	287	67	23.3
Glebe ..	366	59	16.1	108	73	67.6	474	132	27.7
Oistins ..	907	103	11.4	65	48	73.8	972	151	15.5
Total	2,987	282	9.4	718	557	77.6	3,705	839	22.6

It should be noted that the figures in Table V include those shown in Table III for expectant mothers.

In 1960, 349 or 12.2 percent of 2,868 new cases and 334 or 76.5 percent of 437 repeat cases were positive. Overall there were 683 or 20.6 percent of 3,305 positive bloods in 1960.

(vi) *School Health Services*

- (a) Eye Testing – The Senior Ophthalmic Surgeon of the Barbados General Hospital paid regular fortnightly visits to the St. Philip Health Centre for examining the eyes of children referred from schools. The number of cases seen is shown in Table VI.

TABLE VI

*Eye Examinations of School Children*

1961 – 278

1960 – 33 (from October, when Clinic started)

- (b) Dental Services – Each of the two Dental Surgeons paid one visit a week to the St. Philip Health Centre. At the clinic expectant mothers are attended to as well as school children. The number of cases seen is shown in Table VII below:

TABLE VII

*Attendances at Dental Clinics*

			1961	1960
School Children	...	...	1,409	1,303
Expectant mothers	...	...	410	223
Total	...	...	1,819	1,526

- (vii) *Laboratory* – The Laboratory work is directed and supervised by the Public Health Laboratory Service. Two technicians attend the Ante-natal Clinics at Six Cross Roads for doing Haemoglobin levels and albuminuria testing of expectant mothers. Details will be found in the laboratory report.

- (viii) *Home Visiting* – Home visiting by the Public Health Nurses is a regular feature of the services offered. During the year 1,207 home visits were paid. Details are shown in Table VIII below:

TABLE VIII

*Home Visits*

	Six + Roads	Gall Hill	Kendal	St. Augustine	Glebe	Oistins	Total
No. of visits ..	331	163	10	130	105	468	1,207
1960 .. ..	–	–	–	–	–	–	481

- (ix) *Family Planning* – Regular visits were paid to the clinics throughout the year by members of the Family Planning Association. Advice was given to 200 new and to 624 old cases; in 1960 the figures were 131 and 336 respectively.

**Public Health Inspector**

On 1st April, 1961, Mr. C. E. Haynes was appointed Chief Public Health Inspector, South, and an office for him was provided at the Six Cross Roads Centre.

Mr. Haynes' first task was to establish a good working relationship between himself and the Public Health Inspectorial staff of the Southern District Council; in this he was eminently successful and throughout the year there existed a cordial and co-operative relationship between himself and the officers of the District Council.

The work of the Chief Public Health Inspector was concerned primarily with the following:



(i) *Environmental Hygiene*

During the year 47 primary schools were inspected, special attention being paid to the state of repair of the buildings and to general sanitary arrangements. Reports were forwarded to the Department of Education.

Premises in all areas of the district were inspected; nuisances which could be dealt with on the spot were remedied, others were referred to the Public Health Inspectors of the Southern District Council, with suggestions and advice for their abatement.

During the year 168 pre-cast concrete units, produced by the Environmental Sanitation Unit, were installed.

(ii) *Scavenging*

A motor truck scavenging service for the Southern District was put into operation by the Council on 26th May; prior to this only the Parish of Christ Church had such a service. At present the service operates daily in Christ Church, four days a week in St. Philip, three days a week in St. George and St. Michael (South) and twice weekly in St. John. This has resulted in considerable improvement in the scavenging in the district.

(iii) *Land Development*

There were 83 applications for the erection or extension of buildings from the Town and Country Planning Department, and 10 for permission to divide and sell land in lots under Section 52 of the Public Health Act, 1908 (as amended 1959-4).

(iv) *Aedes Aegypti Eradication Programme*

The aedes index (Percentage positive premises) in St. John and St. Philip remained low throughout the year, while that in St. George and St. Michael showed a reduction. In Christ Church, however, the index remained persistently high.

The eradication programme consists essentially of inspection of premises and perifocal treatment of water containers with D.D.T. The work is carried out by two teams, one consisting of one supervisor and five inspectors operating in Christ Church and in the Hastings locality of Bridgetown, and the other of one supervisor and six inspectors operating in the parishes of St. Philip, St. George and St. John.

Greater co-operation by the Public Health Inspectors of the District Council is necessary if the eradication programme is to be completed.

(v) *Notifiable Diseases*

During the period under review eleven notifications of infectious diseases were received as follows:—

Enteric Fever ...	...	7
Pulmonary Tuberculosis	...	2
Broncho pneumonia	...	2

All the houses where these cases occurred were visited and the occupants given appropriate advice. T.A.B. inoculations were given to 257 contacts of Enteric Fever.

(vi) *Water Samples*

Water samples for bacteriological examination were taken regularly throughout the year from sources and distribution points in the District. Of 103 such samples only 7 were unsatisfactory on first examination, on repeat examination all were found to be satisfactory.



*(vii) Nuisances*

Several complaints of nuisances, involving such things as mosquitoes, flies, refuse disposal and bad odours, were investigated and appropriate advice given. When necessary these matters were drawn to the attention of the Public Health Inspectors of the Southern District Council.

**Visitors**

Included among the visitors to the Six Cross Roads Health Centre were the following:—

The Honourable Mr. DaCosta Edwards, Minister of Social Services.  
Dr. M. A. Byer, O.B.E., Director of Medical Services.  
Dr. Donald M. Watkin, W.H.O. Nutritionist.  
Miss Monica Green, Save the Children Fund.  
Mr. Arthur Robinson, UNICEF Area Chief  
Dr. I. B. Lindsay, Dean, School of Social Work, Harvard University.  
Dr. J. Arneaud, Senior Pathologist, Trinidad.  
Dr. R. Kellett, Government Malariologist, Trinidad.  
Professor T. H. Weller, Harvard University.  
Miss R. Felsted, Matron, U.C.W.I., Jamaica.  
Dr. J. Chopra, W.H.O., Nutrition Adviser.  
Miss N. Cunningham, W.H.O. Nursing Adviser.  
Miss Stella Landauer, W.H.O. Nursing Consultant.

**Thanks**

Thanks are due to all members of the Health Centre Staff who throughout the year carried out their duties with keenness and efficiency and with an excellent spirit of co-operation.

STATISTICAL REPORT

District Hospital — Period January to December, 1961

Month	Total Admis- sions	Booked	Not Booked	Deliv- eries	Dis- charges	Post Natal Clinics		Clinics referred from					Non-Clinic Pa- tients	Ref'd. by Self	Transfers to			Neo- Natal Deaths	Still Births	Abor- tions
						No. of Clinics	No. of Attend- ances	Oistins	Six + Roads	St. George	St. John	En- more	Matern- ity Hos- pital		General Hospital	Moth- ers	Infants	Mater- nity Prem. Infants		
January ..	5	3	2	6	7	1	4	1	2	—	—	—	—	—	—	—	—	—	—	—
February ..	18	10	—	15	12	3	5	9	4	2	—	1	—	—	—	—	—	—	—	—
March ..	22	17	5	22	13	4	12	13	3	1	1	—	1	—	—	—	—	—	—	—
April ..	28	16	4	22	24	4	14	12	11	—	—	1	—	—	—	—	1	—	1	—
May ..	24	16	4	22	27	5	24	14	4	2	—	—	—	—	—	—	—	—	—	—
June ..	37	37	—	33	37	4	23	22	10	2	—	1	—	—	—	—	—	—	—	—
July ..	37	38	1	39	37	4	20	17	9	2	—	—	—	—	—	3	—	—	2	—
August ..	43	29	7	36	36	5	36	25	9	1	—	1	—	—	—	3	—	—	—	—
September ..	32	24	3	28	30	4	34	13	11	2	2	1	—	1	—	2	—	1	—	—
October ..	34	33	—	33	32	5	32	20	9	—	—	1	—	—	1B	—	1	—	—	—
November ..	50	39	3	42	47	4	32	36	7	3	—	1	—	1	—	3	—	—	1	1C
December ..	45	42	—	42	39	3	22	25	9	3	2	1	—	—	—	2	—	2	—	—
Total ..	384	310	32	347	347	46	258	213	91	19	5	8	1	2	13	1	2	6	5	1

A — Referred by St. John's Infirmary.  
B — Congenital Deformities.  
C — 6/12 Gestation.



## ST. MICHAEL'S CHEST CLINIC

*Dr. E. Cochrane, Senior Medical Officer of Health*

There were 18 admissions as against 14 in 1960. Of these only 4 were active cases of T.B. of the lungs. Four cases were re-admissions, 2 of them were not active cases and their disease had been arrested but were under-nourished and in need of rest and recuperation. The other two were relapsed cases, both of them had been attending irregularly for out-patient treatment.

On account of the fall in the number of cases, more beds were available to accommodate children with early primary infection.

This is a section of the community for whom hospital accommodation is not available since they are not infectious cases and not seriously ill.

However preventive treatment at this stage ensures complete recovery and lessens the possibility of the active disease in later life. Ten children were admitted and as in the previous year, they all made excellent progress.

Eighteen patients were discharged, much improved and quiescent. There was one death of a patient who had been admitted to the Chest Clinic in 1955.

LOCAL GOVERNMENT INSTITUTIONS

Routine annual inspections were made at each of the Infirmaries.

The medical care of the poor in the parishes was efficiently carried out by the District Medical Officers.

NURSING SERVICES

The General Nursing Council functioned throughout the year.

The Barbados Nurses' Association operates an employment bureau and administers a Government Grant of \$4,580 under the supervision of the Director of Medical Services.

Part VIII. GENERAL AND COMMUNICABLE DISEASES

Figures in this part of the Report and the statistical tables in the Appendices refer to the calendar year 1961.

General Diseases

	1960		1961	
	Deaths	% of total Deaths	Deaths	% of total Deaths
Diseases of Circulatory System ...	456	21.44	539	22.37
Diseases of Nervous System and Sense Organs ...	319	15.00	358	14.85
Diseases of Early Infancy ...	267	12.55	264	10.95
Neoplasms ...	230	10.81	252	10.46
Diseases of Respiratory System ...	215	10.11	235	9.75
Diseases of Digestive System ...	155	7.29	197	8.17
Senility and Ill-defined conditions ...	137	6.44	166	6.89
Allergic, Endocrine System, Metabolic and Nutritional Diseases ...	80	3.76	107	4.44

More detailed information is given in the Appendices to the Report and special attention is drawn to the eight major causes of death as classified under the Intermediate International List of Causes of Death. These Statistics are shown for 1957-61.

Communicable Diseases

*Enteric Fever.* Fifteen (15) cases were reported as compared with eleven in 1960. There were no deaths from this cause.

Parish	No. of Cases	
	1960	1961
St. Andrew .. ..	1	—
Christ Church .. ..	—	—
St. George .. ..	1	4
St. James .. ..	—	—
St. John .. ..	—	1
St. Joseph .. ..	—	—
St. Lucy .. ..	—	—
St. Michael .. ..	8	10
St. Peter .. ..	—	—
St. Philip .. ..	—	—
St. Thomas .. ..	1	—
Total .. ..	11	15



## Tuberculosis

Year	Whole Island		St. Michael		
	Cases Notified	Deaths	Cases Notified	% of Whole	Deaths
1960	43	16	29	67.4	9
1961	47	13	35	74.5	8

*Diphtheria.* One case was reported. There were no deaths.

*Venereal Disease.* Of the 25 deaths caused by syphilis or 1% of total deaths, one occurred within the first year of life and one from the first to the fourth year.

*Leprosy.* There were no cases nor deaths reported.

*Tetanus.* Eighteen deaths were recorded. Of this number nine were infants under one year of age.

*Cerebro-Spinal Meningitis.* There were no cases nor deaths reported.

*Poliomyelitis.* There were no cases nor deaths reported.

*Leptospirosis.* There were no cases nor deaths reported.

*Malaria.* The Colony remained free from Malaria.

*Whooping Cough.* Five deaths were reported; 4 were infants under one year.

### Part IX. QUARANTINE

No quarantinable diseases were reported during the year.

Routine Rat Control measures were carried out in the Port Area throughout the year.

This area is inspected daily and special attention is paid to mosquito breeding. The Port area is aedes free.

### Part X. GENERAL SANITATION

The three Local Government Councils through their Public Health Committees have assumed full responsibility for the sanitation of their respective areas.

In accordance with the provisions of the Public Health Act, 1954 a Medical Officer of Health and a Chief Public Health Inspector are nominated for each Council.

The Medical Officer of Health is entitled to attend all meetings of the Public Committee for his Area in an Advisory and consultative capacity. The Councils have all shown great appreciation of this assistance from the Central Government.

### Part XI. FOOD

#### SUPPLIES AND NUTRITION

The excellent figures recorded in the section for vital statistics are in no small measure due to an improved standard of nutrition in the population generally. Increased catches of fish have been made available to the people, and the large sums of money sent back to Barbados by workers who have found employment abroad, have made it possible for the diet of the average family to be improved.

### Part XII. SCHOOL NUTRITION PROGRAMME

The supply of skimmed milk and biscuits enriched with Vitamin B has been continued. This supplement is intended to supply those food factors which are known to be deficient in the diets of the children.

### Part XIII. SCHOOL HEALTH SERVICES

	1960	1961
Number of children receiving dental care	7,447	8,212
Number of children treated for visual defects ... ..	465	648
Number of children provided with spectacles ... ..	161	576
Number of repairs to spectacles ...	74	64
Number of replacement of spectacles ...	—	8

The four-fold increase in the number of spectacles provided over a period of only twelve months indicates the demand which exists for this service, a demand which still very greatly exceeds the supply of spectacles.

### Part XIV. HEALTH EDUCATION

This is one of the primary functions of the Health Centres. Throughout the year, and at all of the Clinics, no opportunity is lost in bringing to the people who attend the clinics all of the available information on a wide range of health topics.

That this teaching has met with a considerable measure of success, is quite evident. The regular attendances at Ante-natal Clinics, the response to the advice given on immunization programmes for the infants, and the large numbers who attend for blood tests for syphilis, these are indications that patterns of living are being changed.

Classes were arranged for the preparation of public health inspectors for the examinations for the certificate of the Royal Society of Health.

Four persons were selected for training at the West Indies School of Public Health in Jamaica; three were Public Health Inspectors and one was a nurse.

### Part XV. SPECIAL AWARD

Perhaps the most outstanding event for the year was the award of the Kettering Shield to Barbados. This shield is one of the awards presented by the National Baby Welfare Council, in its triennial competition for advances in the Maternity and Child Welfare Services in British overseas territories.

The Kettering Shield was awarded to Barbados for:—

“Outstanding advances in the field of maternal and child care especially in

- (i) the great reduction in infant mortality,
- (ii) health education to individuals, the family and the community,
- (iii) the energetic methods of tackling local health problems.”

This award was received by Mrs. M. A. Byer, wife of the Director of Medical Services from the Duchess of Gloucester on Tuesday 11th July, at the Central Hall, Westminster, London.

### Part XVI. W.H.O. PERSONNEL

The Department wishes to place on record its great appreciation of the help and advice which it has had from the W.H.O. Personnel, Mr. Carlton Gilks, Mr. James Allen and Miss Norah Cunningham, stationed in Barbados and also for those members of the organisation who have visited the island during the year.

### Part XVII. CONFERENCES

The following attended Conferences during the year:—

The Director — Standing Advisory Committee for Medical Research in the British Caribbean held in Barbados from 10th to 13th April.



- Dr. R. A. J. Webb – For summary of a paper presented by the Director of Medical Services on Screening for syphilis please see Appendix XXIV.
- Miss E. Walters, – Steering Committee of Nursing Administrators from 24th –  
Matron, General 28th April at Federal House, Port of Spain.  
Hospital.
- Dr. E. Cochrane, – Conference of Ministers of Health in the West Indies held  
Acting Director of at Federal House from 17th – 21st July, 1961.  
Medical Services.

### Part XVIII. VISITS

- Dr. D. M. Watkin, Adviser in Nutrition, Zone I & II.  
Miss Verna Huffman, W.H.O. Nursing Consultant.  
Miss Monica Green, Save the Children Fund.  
Professor E.T.C. Spooner, Medical Research Board.  
Dr. R. Lewthwaite, C.M.G., O.B.E., Adviser on Medical Research to the Secretary  
for Technical Co-operation.  
Sir Harold Himsworth, K.C.B., F.R.S., F.R.C.P., Secretary of the Medical Research Council of Great Britain.  
Professor Thomas Weller, Tropical Public Health, Harvard University.  
Mr. Holgote, F.R.C.S., Surgeon Specialist, Grenada.  
Miss E. Felsted, Matron, U.C.W.I. Hospital.  
Dr. G. H. K. Gentle, W.H.O. V.D. Consultant.  
Dr. Ken Stuart, Senior Lecturer in Medicine, U.C.W.I. Hospital.  
Dr. Joan Angus, Lecturer in Paediatrics.  
Dr. Kupka, W.H.O.  
Miss F. Williamson, ICA Health Educator.  
Dr. J. S. Garrow, Scientific Secretary, Tropical Metabolism Unit, U.C.W.I.  
Miss J. Thomson, W.H.O. Nursing Consultant, Zone I Office.

### Part XIX. FINANCE

The following financial statement of expenditure and revenue is for the year 1961–62:

Director of Medical Services ..	\$ 164,739
General Hospital .. ..	1,822,147
Mental Hospital ..	534,135
Lazaretto .. ..	45,755
District Hospital Services ..	30,955
Health Centres.. ..	267,263
Maternity Hospital ..	47,517
<i>Grants</i>	
Barbados Nurses Association ..	4,580
<i>Revenue</i>	
Total Medical Departments ..	122,444

### Part XX. CONCLUSION

Once again I wish to place on record my very sincere thanks to all members of the staff in all the sections of this department for the way in which they have endeavoured to meet the steadily increasing demand for services which are so very essential to the community.

Their efficiency, loyalty and personal interest in the work has enabled this Department to present another report which registers several valuable steps on the road to Better Health of the community.

M. A. BYER  
Director of Medical Services.

## APPENDIX I

Dr. F. N. Grannum, Health Officer (Port) performed his duties until the 15th June when he went on Overseas Leave.

During his absence, Dr. J. E. Walcott, Assistant Health Officer (Port), was appointed to act as Health Officer (Port).

Mr. W. A. Abrahams, Government Chief Public Health Inspector was appointed to act as Assistant Health Officer (Port) with effect from 15th June, in conjunction with his other duties.

### SHIPPING

During the year 1961, 1,473 ships were admitted to the Port of Bridgetown representing a total nett tonnage of 2,520,983 tons.

This tonnage was apportioned as follows:—

Total Merchant Shipping	—	1,374	—	2,492,665 tons
Others .. ..	—	99	—	28,318 tons
Total shipping for year	—	1,473	—	2,520,983 tons

The following table shows the figures for the past five years:

YEAR		NUMBER OF SHIPS	NETT TONNAGE
1957	..	1,090	2,063,689
1958	..	1,129	2,024,130
1959	..	1,277	2,199,124
1960	..	1,358	2,384,269
1961	..	1,473	2,520,983



**APPENDIX I — Continued**

**Return of Shipping for the year 1961**

**MERCHANT SHIPPING**

CLASSES OF VESSELS			NATIONALITY	NUMBER OF VESSELS	NETT TONNAGE
Steam and Motor	..	..	British	518	945,739
			Norwegian	120	298,632
			Dutch	77	163,592
			German	63	83,703
			American	50	119,194
			Liberian	47	73,446
			Italian	35	166,964
			French	34	214,321
			Panamanian	28	47,984
			Netherlands	23	146,249
			Venezuelan	15	6,214
			Canadian	11	1,830
			Spanish	9	64,232
			Swedish	7	22,316
			Nicaraguan	4	4,542
			Danish	4	10,614
			Greek	3	11,324
			Israeli	2	10,362
			Honduran	1	213
			Swiss	1	2,666
				1,052	2,394,137
Tankers	..	..	Panamanian	9	14,389
			British	9	16,488
			Norwegian	8	23,486
			American	4	3,816
			Dutch	2	6,798
			Greek	2	13,108
			Liberian	1	155
			Swedish	1	6,522
				36	84,762
Sailing Vessels	..	..	British	286	13,766
			TOTAL MERCHANT SHIPPING		

**APPENDIX I - Continued**

CLASSES OF VESSELS	NATIONALITY	NUMBER OF VESSELS	NETT TONNAGE
Yachts .. ..	British	43	1,100
	American	21	1,924
	Austrian	2	20
	Panamanian	4	284
	French	2	40
	German	2	14
	Australian	1	13
	Venezuelan	1	35
	Swedish	1	56
	South African	1	25
	Costa Rican	1	42
		79	3,553
Naval Ships .. ..	American	7	5,550
	British	6	14,267
	Venezuelan	2	2,460
	Canadian	1	2,100
		16	24,377
Tug .. ..	British	1	204
	Norwegian	1	21
		2	225
Barge .. ..	American	2	163
TOTAL OTHER SHIPPING		99	28,318
TOTAL MERCHANT SHIPPING		1,374	2,492,665
TOTAL OTHER SHIPPING		99	28,318
TOTAL SHIPPING FOR YEAR 1961		1,473	2,520,983

**AIRCRAFT 1961**

Nationality	Aircraft
British .. ..	2,601
American .. ..	664
Canadian .. ..	221
French .. ..	203
Venezuelan .. ..	14
Dutch .. ..	12
Brazilian .. ..	1
Dominican .. ..	1
Mexican .. ..	1
Belgian .. ..	1
TOTAL .. ..	3,719



## APPENDIX II

### CASES OF NOTIFIABLE DISEASES FOR THE YEAR 1961

#### DISTRIBUTION OF CASES BY PARISHES

DISEASES		St. Michael	Christ Church	St. George	St. Philip	St. John	St. James	St. Thomas	St. Peter	St. Lucy	St. Joseph	St. Andrew	TOTAL
Cerebro-spinal Meningitis	..	-	-	-	-	-	-	-	-	-	-	-	-
Cholera	..	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	..	1	-	-	-	-	-	-	-	-	-	-	1
Enteric Fever	..	10	-	4	-	1	-	-	-	-	-	-	15
Leprosy	..	-	-	-	-	-	-	-	-	-	-	-	-
Leptospirosis	..	-	-	-	-	-	-	-	-	-	-	-	-
Plague	..	-	-	-	-	-	-	-	-	-	-	-	-
Poliomyelitis	..	-	-	-	-	-	-	-	-	-	-	-	-
Smallpox	..	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis	..	35	2	2	1	1	-	1	-	-	3	2	47
Typhus Fever	..	-	-	-	-	-	-	-	-	-	-	-	-
Yellow Fever	..	-	-	-	-	-	-	-	-	-	-	-	-

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

CAUSE GROUPS		St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes				
		M		F		M		F		M		F		M		F		M		F		M		F		M	F	Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F					
L.	Infective and Parasitic Diseases	24	10	6	4	2	7	6	5	4	3	3	2	—	1	—	—	2	3	3	2	1	51	38	89			
II.	Neoplasms..	32	76	17	27	2	10	3	10	7	9	7	10	4	4	3	7	4	5	1	5	83	169	252				
III.	Allergic, Endocrine System, Metabolic and Nutritional Diseases	20	23	5	11	2	5	6	4	3	2	—	—	6	2	—	—	2	2	5	1	2	51	56	107			
IV.	Diseases of Blood and Blood Forming Organs ..	2	4	1	1	—	—	1	1	—	—	1	—	—	—	—	—	—	1	—	—	5	8	13				
V.	Mental Psychocherotic and Personality Disorders	4	4	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	5	4	9				
VI.	Diseases of Nervous System and Sense Organs ..	67	92	20	27	15	23	13	8	12	8	4	13	7	9	6	10	5	6	2	3	153	205	358				
VII.	Diseases of Circulatory System	84	156	24	42	10	27	13	24	7	18	7	28	7	10	9	15	5	14	9	15	178	361	539				
VIII.	Diseases of Respiratory System	42	51	13	10	7	12	7	2	2	1	9	4	11	3	20	11	7	7	4	3	128	107	235				
IX.	Diseases of Digestive System	37	38	5	13	11	6	9	13	7	3	4	3	9	5	4	4	4	4	6	4	101	96	197				
X.	Diseases of Genito-Urinary System	21	14	1	—	2	1	3	3	—	1	2	2	3	—	1	1	—	—	—	—	35	22	57				
XI.	Deliveries and Complications of Pregnancy, Child Birth and the Puerperium	—	10	—	—	—	1	—	—	—	—	—	—	—	2	—	1	—	—	—	—	—	15	15				
XII.	Diseases of the Skin and Cellular Tissue	—	7	—	3	—	2	—	—	—	—	—	1	—	3	—	—	1	—	—	—	—	17	17				
XIII.	Diseases of the Bones and Organs of Movement	1	4	—	—	—	—	2	3	—	—	1	—	—	—	—	—	—	—	—	—	4	7	11				
XIV.	Congenital Malformations	7	1	2	3	—	1	1	1	—	1	—	—	—	—	1	2	—	—	1	—	12	10	22				
XV.	Certain Diseases of Early Infancy	52	56	14	16	15	12	12	9	4	10	5	9	11	6	8	3	4	3	6	3	135	129	264				
XVI.	Symptoms, Senility and Ill-defined Conditions ..	32	47	7	15	1	2	3	11	—	—	2	7	4	9	4	7	1	5	1	5	57	109	166				
XVII.	Accidents, Poisonings and Violence (External)	17	4	5	2	2	2	4	1	2	—	2	2	1	—	7	1	1	1	3	—	46	13	59				
XVIII.	Accidents, Poisonings and Violence (Nature) ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
TOTAL ALL GROUPS		442	597	120	174	69	111	84	95	48	56	47	81	63	54	64	62	34	51	41	48	32	37	1,044	1,366	2,410		



CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		M	F	Total
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
A 1	Tuberculosis of respiratory system ..	001-008	6	2	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	9	4	13
A 6	Congenital Syphilis ..	020	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	-	2	
A 7	Early Syphilis ..	021	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	-	1	
A 10	All other Syphilis ..	022, 023 } 026-029 }	10	3	2	..	..	..	1	3	1	2	1	..	..	..	..	..	..	..	1	1	..	..	16	9	25
A 11	Gonococcal infections ..	030-035	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	-	1	
A 13	Paratyphoid fever and other Salmonella infections	041, 042	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	-	1	
A 16(a)	Bacillary dysentery ..	045	1	..	..	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	3	4	
	(c) Other unspecified forms of dysentery	047, 048	..	1	..	1	..	1	..	2	..	..	..	1	..	..	..	..	..	..	..	..	..	1	5	6	
A 18	Streptococcal sore throat ..	051	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	-	2	2	
A 20	Septicaemia and pyaemia ..	053	1	2	..	1	..	..	2	..	..	..	..	..	..	1	..	..	..	..	..	..	..	3	4	7	
A 22	Whooping cough ..	056	..	1	..	..	..	..	..	..	1	1	..	..	..	..	..	..	2	..	..	..	..	1	4	5	
A 26	Tetanus ..	061	2	..	1	1	4	3	..	..	2	..	1	..	..	..	1	..	..	..	..	1	1	12	6	18	
A 34	Infectious hepatitis ..	092	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	-	1	
A 43(1)	All other diseases classified as infective and parasitic ..	010-138	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	..	2	1	3	
A 44	Malignant neoplasm of buccal cavity and pharynx	140-148	6	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	6	1	7	
A 45	Malignant neoplasm of oesophagus ..	150	4	3	3	..	..	..	1	1	..	..	3	..	1	..	..	..	..	..	1	..	1	13	5	18	
A 46	Malignant neoplasm of stomach ..	151	9	7	1	6	1	1	1	1	2	1	1	1	2	..	1	1	1	1	..	..	..	19	19	38	
A 47	Malignant neoplasm of intestine, except rectum	152, 153	2	5	..	3	..	1	1	1	2	..	1	..	..	1	..	..	..	..	..	1	1	6	11	17	
A 48	Malignant neoplasm of rectum ..	154	..	2	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	-	3	3	
A 49	Malignant neoplasm of larynx ..	161	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	2	
A 50	Malignant neoplasm of trachea, and bronchus and lung not specified as secondary ..	162, 163	3	3	4	..	2	..	..	..	1	..	1	1	..	..	..	..	..	..	..	..	..	9	6	15	
A 51	Malignant neoplasm of breast ..	170	..	9	..	3	2	..	1	1	..	1	2	..	..	2	2	2	1	1	2	2	..	-	25	25	
A 52	Malignant neoplasm of cervix uteri ..	171	..	16	..	1	2	..	4	..	3	3	3	..	..	2	2	2	2	2	..	1	..	-	34	34	
A 53	Malignant neoplasm of other and unspecified parts of uterus ..	172-174	..	6	..	6	..	..	1	1	..	1	1	..	2	..	..	1	..	..	1	1	..	-	19	19	
A 54	Malignant neoplasm of prostate ..	177	2	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	5	-	5	
A 56	Malignant neoplasm of bone and connective tissue ..	196, 197	..	1	..	1	1	..	..	..	1	1	..	..	..	1	..	..	..	..	..	..	..	2	4	6	





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			M		F		M		F		M		F		M		F		M		F		M		F		M		F		Total
A	78(b) All other diseases of nervous system and sense organs .. .. .	341-344 350-352 354-357 360-369 395-398	5	6	1	3	1	1	1	..	1	..	..	1	..	..	..	..	1	..	..	..	..	..	10	11	21				
A	79 Rheumatic fever .. .. .	400-402	..	..	..	..	..	..	..	..	..	..	2	..	..	..	1	..	..	..	1	..	..	3	1	4					
A	80 Chronic rheumatic heart disease .. .. .	410-416	1	2	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	4					
A	81 Arteriosclerotic and degenerative heart disease .. .. .	420-422	25	28	14	23	7	21	5	13	2	6	4	19	3	2	1	..	6	5	8	3	67	131	198						
A	82 Other diseases of heart .. .. .	430-434	19	32	2	3	..	..	..	1	..	1	..	1	..	2	3	1	1	..	1	..	2	24	47	71					
A	83 Hypertension with heart disease .. .. .	440-448	12	10	3	6	..	..	1	3	1	1	..	3	2	1	8	2	3	3	..	..	..	23	37	60					
A	84 Hypertension without mention of heart .. .. .	444-447	5	24	1	6	1	3	..	2	..	..	..	4	2	2	..	..	3	3	..	..	1	16	46	62					
A	85 Diseases of Arteries .. .. .	450-456	19	58	4	4	2	3	5	4	4	10	1	1	..	3	1	2	1	2	3	..	38	94	132						
A	86 Other diseases of Circulatory system .. .. .	460-468	3	2	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	1	5	3	8						
A	87 Acute upper respiratory infections .. .. .	470-475	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	3	1	4						
A	89 Lobar pneumonia .. .. .	490	8	8	2	3	2	..	2	..	..	1	1	..	2	..	1	1	..	..	1	1	3	22	15	37					
A	90 Bronchopneumonia .. .. .	491	19	30	5	7	5	10	2	1	1	..	4	2	6	2	3	3	1	1	2	1	3	50	59	109					
A	91 Primary atypical, other and unspecified pneumonia .. .. .	492, 493	1	2	2	..	..	..	..	1	..	..	1	1	2	..	7	3	2	3	1	..	..	16	10	26					
A	92 Acute bronchitis .. .. .	500	..	1	..	..	..	..	2	..	..	..	1	..	..	..	9	3	2	3	..	..	..	14	7	21					
A	93 Bronchitis, chronic and unqualified .. .. .	501,502	2	4	1	..	..	..	..	..	1	..	2	..	..	1	..	..	..	..	..	..	6	5	11						
A	94 Hypertrophy of tonsils and adenoids.. .. .	510	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	1	2						
A	95 Empyema and abscess of lung .. .. .	518, 521	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2					
A	96 Pleurisy .. .. .	519	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1					
A	97(b) All other respiratory diseases .. .. .	511-517 520, 522 524-527	10	6	1	..	..	1	1	..	..	..	..	1	1	..	..	1	1	..	..	..	..	14	9	23					
A	99 Ulcer of stomach .. .. .	540	1	2	..	1	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	3	3	6					
A	100 Ulcer of duodenum .. .. .	541	..	..	..	..	..	..	1	1	..	..	1	..	..	..	..	..	1	..	..	..	2	2	4						
A	101 Gastritis and duodenitis .. .. .	543	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2						
A	102 Appendicitis .. .. .	550-553	..	1	..	..	2	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	3	3	6						
A	103 Intestinal obstruction and hernia .. .. .	560,561,570	4	8	..	..	2	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	1	9	8	17					





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SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
A 121	Infections of skin and subcutaneous tissue ..	690-698	..	5	..	..	1	..	..	..	..	..	1	..	2	..	..	..	1	..	..	..	..	..	-	10	10
A 122	Arthritis and Spondylitis ..	720-725	1	4	..	..	..	..	2	3	..	..	1	..	..	..	..	..	..	..	..	..	..	..	4	7	11
A 126(a)	Chronic ulcer of skin (including tropical ulcer)	715	..	1	..	3	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	-	5	5	
(b)	All other diseases of skin ..	700-714,716	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	-	2	2	
A 127	Spina bifida and meningocele ..	751	..	..	..	2	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	2	3	
A 128	Congenital malformations of circulatory system	754	2	..	..	1	..	..	..	..	1	..	..	..	..	..	2	..	..	..	..	..	1	3	4	7	
A 129	All other congenital malformations ..	750,752	5	1	2	..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	1	..	8	4	12	
A 130	Birth injuries ..	753,755-759	3	4	2	2	1	..	1	1	1	..	..	..	1	..	..	..	..	..	..	2	..	8	10	18	
A 131	Postnatal asphyxia and atelectasis ..	762	4	5	3	1	1	1	..	..	3	..	..	..	..	1	..	1	..	..	..	..	..	9	10	19	
A 132(a)	Diarrhoea of newborn (under 4 weeks)	764	1	2	..	..	..	1	..	..	1	..	..	..	1	..	..	..	..	..	1	..	..	3	4	7	
(c)	Other infections of newborn ..	763,766-768	3	1	..	1	3	..	2	..	1	1	..	..	2	..	3	1	1	..	1	..	..	16	4	20	
A 133	Haemolytic disease of newborn ..	770	2	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	1	3	
A 134	All other defined diseases of early infancy ..	769,771,772	11	7	4	1	5	5	7	5	2	1	3	..	2	1	..	..	1	..	..	1	32	27	59	59	
A 135	Ill-defined diseases peculiar to early infancy, and immaturity unqualified ..	773,776	28	37	5	10	5	5	4	1	1	4	6	4	6	2	2	2	3	2	4	..	4	1	65	73	138
A 136	Senility without mention of psychosis ..	794	24	36	3	13	..	1	2	5	..	..	2	2	6	2	6	1	3	..	2	..	..	36	74	110	
(b)	All other ill-defined causes of morbidity ..	780-787	8	11	4	2	1	1	6	..	..	..	5	5	3	2	1	..	2	..	3	2	1	21	35	56	
A 137(c)	All other ill-defined causes of morbidity ..	788.1-788.7																									
		788.9																									
		789-792,795																									

“E” CODE CLASSIFICATION OF ACCIDENTS, POISONINGS, AND VIOLENCE

AE 138	Motor vehicle accidents	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
AE 140	Accidental poisoning	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	1	3
AE 141	Accidental falls	..	..	..	1	..	..	..	..	2	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	6	4	10
AE 143	Accidents caused by fire and explosions of combustible materials	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2
AE 144	Accident caused by hot substance, corrosive liquid, steam and radiation	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	2	3
AE 145	Accident caused by firearm	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	—	2	2

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
AE 146	Accidental drowning and submersion	..	3	..	..	..	..	..	1	..	..	..	..	..	2	..	2	..	..	..	..	..	..	..	6	-	6
AE 147	All other accidental causes	..	8	2	2	1	1	..	..	..	..	..	..	..	2	..	2	..	1	..	2	..	2	..	19	3	22
AE 148	Suicide and self-inflicted injury	..	2	..	2	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	6	-	6	
AE 149	Homicide and injury purposely inflicted by other persons (not in war)	..	1	..	1	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	2	2	4	
TOTAL NUMBER OF DEATHS			442	597	120	174	69	111	84	95	48	56	47	81	63	54	64	62	34	51	41	48	32	37	1,044	1,366	2,410



CAUSES OF DEATHS ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION,  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

64



CAUSES OF DEATHS ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION,  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

[illegible]



## APPENDIX V - Continued

CAUSES OF DEATHS ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION, SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

[illegible]



CAUSES OF DEATHS ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION,  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

[illegible]



## APPENDIX V - Continued

CAUSES OF DEATHS ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION,  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

[illegible]





# APPENDIX VI

## MAJOR CAUSES OF DEATH IN ACCORDANCE WITH THE INTERNATIONAL LIST OF CAUSES OF DEATH

1961

-----

Estimated Population: Urban - (Bridgetown, St. Michael) .. 94,265

Rural - .. .. 147,441

CLASSIFICATION	Total No. of Deaths	Urban Deaths	Per 100,000	
			Urban Rate	Rural Rate
VII Circulatory System .. ..	539	240	255	203
VI Nervous System and Sense Organs ..	358	159	169	135
XV Early Infancy .. ..	264	108	115	106
II Neoplasms .. ..	252	108	115	98
VIII Respiratory System .. ..	235	93	99	96
IX Digestive System .. ..	197	75	80	83
XVI Senility and Ill-defined Conditions ..	166	79	84	59
III Allergic, Endocrine System, etc. ..	107	43	45	43

# APPENDIX VII

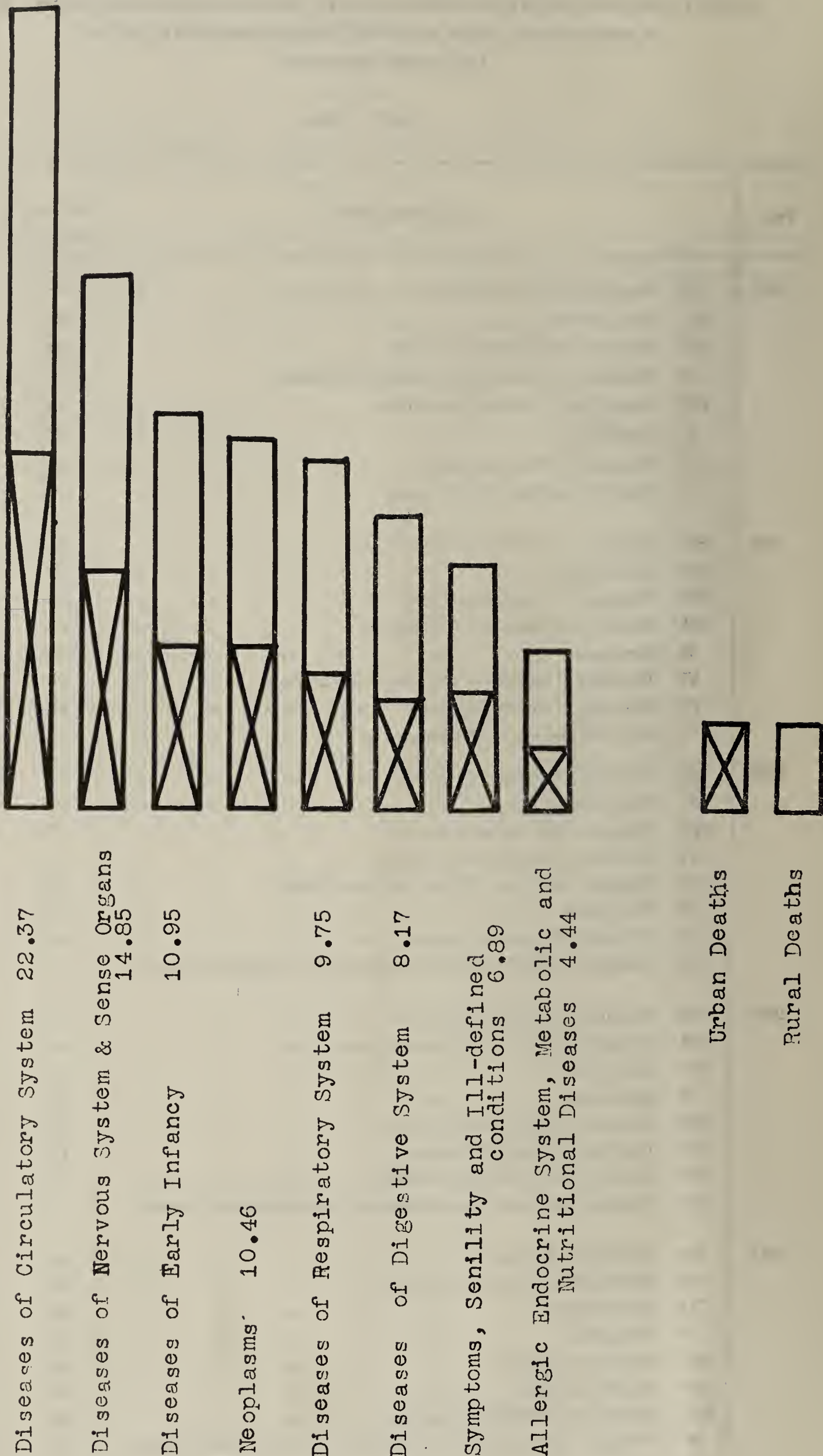
## MAJOR CAUSES OF DEATH IN ACCORDANCE WITH THE INTERNATIONAL STATISTICAL CLASSIFICATION, SIXTH REVISION, 1948 INTERMEDIATE LIST OF 150 CAUSES OF DEATH

1957 - 1961

Year	CLASSIFICATION						No. of Deaths	% of Total Deaths
1957	VII	Diseases of Circulatory System	..	..	..	..	563	22.68
	XV	Early Infancy	..	..	..	..	366	14.82
	VIII	Diseases of Respiratory System	..	..	..	..	300	12.15
	VI	Diseases of Nervous System and Sense Organs	..	..	..	..	240	9.72
	XVI	Senility and Ill-defined Conditions	..	..	..	..	238	9.64
	II	Neoplasms	..	..	..	..	207	8.38
	IX	Diseases of Digestive System	..	..	..	..	144	5.83
	I	Infective and Parasitic Diseases	..	..	..	..	116	4.60
1958	VII	Diseases of Circulatory System	..	..	..	..	551	23.97
	XV	Early Infancy	..	..	..	..	346	14.96
	VIII	Diseases of Respiratory System	..	..	..	..	250	10.87
	XVI	Senility and Ill-defined Conditions	..	..	..	..	216	9.44
	II	Neoplasms	..	..	..	..	199	9.01
	VI	Diseases of Nervous System and Sense Organs	..	..	..	..	190	8.26
	IX	Diseases of Digestive System	..	..	..	..	159	6.91
	I	Infective and Parasitic Diseases	..	..	..	..	119	5.17
1959	VII	Diseases of Circulatory System	..	..	..	..	499	23.94
	XV	Early Infancy	..	..	..	..	266	12.76
	VIII	Diseases of Respiratory System	..	..	..	..	219	10.51
	XVI	Senility and Ill-defined conditions	..	..	..	..	210	10.08
	VI	Diseases of Nervous System and Sense Organs	..	..	..	..	204	9.79
	II	Neoplasms	..	..	..	..	204	9.79
	IX	Diseases of Digestive System	..	..	..	..	141	6.77
	III	Allergic, Endocrine System, Metabolic and Nutritional Diseases					85	4.08
1960	VII	Diseases of Circulatory System	..	..	..	..	456	21.44
	VI	Diseases of Nervous System and Sense Organs	..	..	..	..	319	15.00
	XV	Early Infancy	..	..	..	..	267	12.55
	II	Neoplasms	..	..	..	..	230	10.81
	VIII	Diseases of Respiratory System	..	..	..	..	215	10.11
	IX	Diseases of Digestive System	..	..	..	..	155	7.29
	XVI	Senility and Ill-defined conditions	..	..	..	..	137	6.44
	III	Allergic, Endocrine System, Metabolic and Nutritional Diseases					80	3.76
1961	VII	Circulatory System	..	..	..	..	539	22.37
	VI	Nervous System and Sense Organs	..	..	..	..	358	14.85
	XV	Early Infancy	..	..	..	..	264	10.95
	II	Neoplasms	..	..	..	..	252	10.46
	VIII	Respiratory System	..	..	..	..	235	9.75
	IX	Digestive System	..	..	..	..	197	8.17
	XVI	Senility and Ill-defined conditions	..	..	..	..	166	6.89
	III	Allergic, Endocrine System, Metabolic and Nutritional Diseases					107	4.44



PRINCIPAL CAUSES OF DEATH AS A PERCENTAGE OF TOTAL DEATHS 1961



## APPENDIX IX

CAUSES OF DEATHS OF INFANTS UNDER 1 YEAR ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION,  
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES.

[illegible]



## APPENDIX IX — Continued

CAUSES OF DEATHS OF INFANTS UNDER 1 YEAR ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION, SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES.

[illegible]

CAUSES OF DEATHS OF INFANTS UNDER 1 YEAR ARRANGED IN AGE GROUPS FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION, SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES.

[illegible]

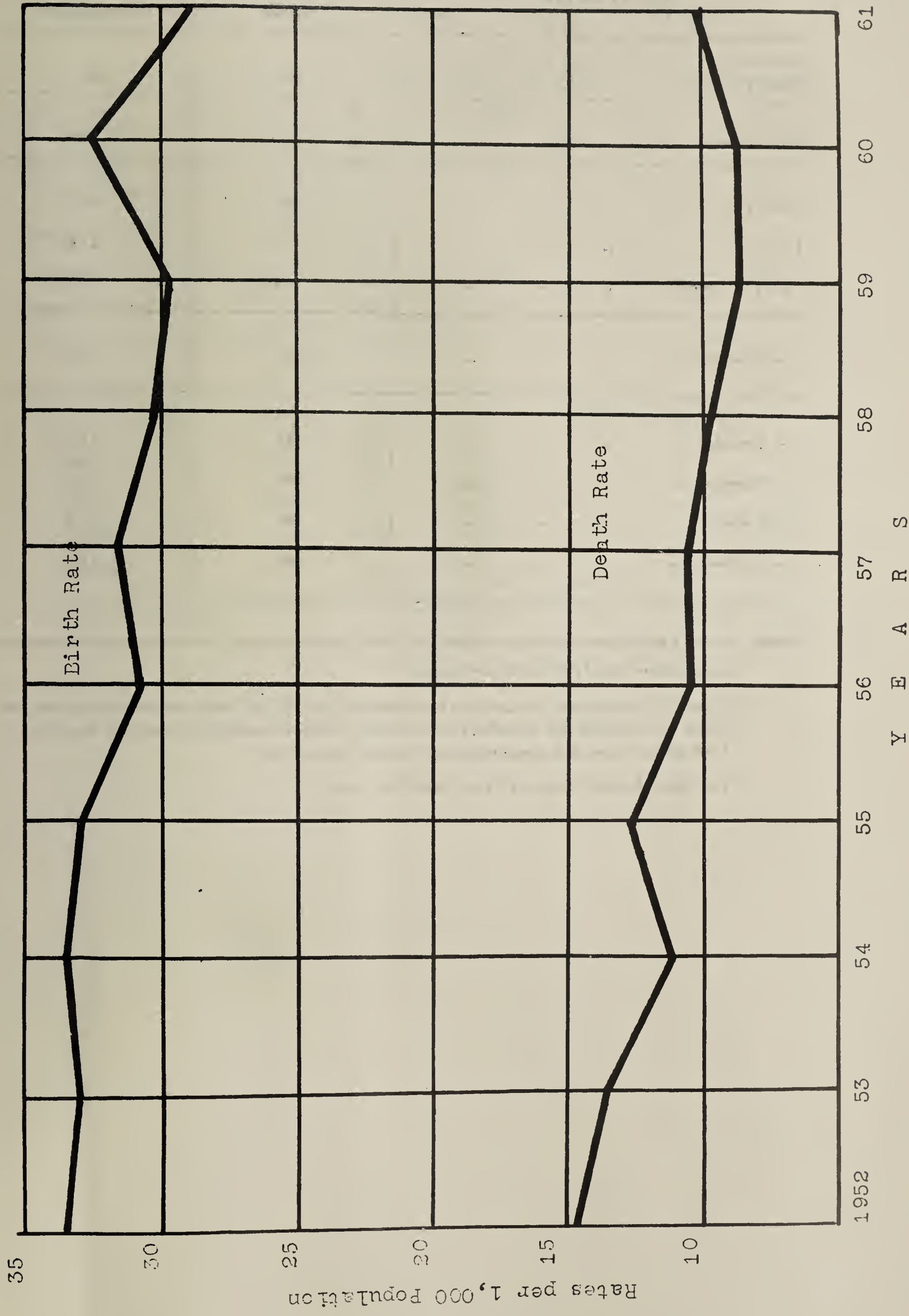


APPENDIX X

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1961 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION  
SIXTH REVISION 1948, INTERMEDIATE LIST OF 150 CAUSES

CAUSE GROUPS		St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
Under 1 (one) day	..	15	19	3	4	2	2	3	1	—	2	—	2	1	—	3	—	—	2	1	—	—	—	28	32	60
	..	21	18	9	7	4	2	4	2	2	3	3	1	9	1	2	1	—	2	3	2	2	59	40	99	
	..	15	9	—	7	5	6	4	1	2	3	2	1	3	3	2	2	4	—	2	—	1	41	33	74	
Total under 1 month		..	51	46	12	18	11	10	11	4	4	8	5	4	13	4	3	4	4	6	2	3	2	128	105	233
1 month — 2 months	..	17	16	1	6	3	7	3	2	3	2	4	2	2	1	4	1	2	1	2	—	2	43	39	82	
3 months — 5 months	..	11	16	3	7	4	4	4	7	2	1	—	1	2	4	5	5	2	5	5	5	4	44	54	98	
6 months — 8 months	..	12	8	3	5	9	4	6	5	2	3	4	1	6	2	7	1	1	1	1	4	2	53	35	88	
9 months — 11 months	..	12	12	9	4	4	3	4	3	—	3	1	3	1	1	2	—	—	1	2	1	2	36	33	69	
Total under 1 year		..	103	98	28	40	31	28	21	11	17	14	11	10	26	10	26	9	12	16	12	7	304	266	570	

BIRTH AND DEATH RATES PER 1,000 OF THE POPULATION FOR 1952-1961





# APPENDIX XII

## INFANT DEATHS BY AGE IN MONTHS - % DISTRIBUTION 1961

AGE AT DEATH	DEATHS IN FIRST YEAR OF LIFE	
	Number	% Distribution
Under 1 year .. .. .	570	100
Under 1 month .. .. .	233	40.9
Under 1 day .. .. .	60	10.5
1 - 6 days .. .. .	99	17.4
7 days to 1 month .. .. .	74	13.0
1 - 11 months .. .. .	337	59.1
1 - 2 months .. .. .	82	14.4
3 - 5 months .. .. .	98	17.2
6 - 8 months .. .. .	88	15.4
9 - 11 months .. .. .	69	12.1

**NOTE:** Of the 6,805 infants born alive in 1961, 223 died in the first months of life; the neo-natal mortality rate therefore was 34 per 1,000 live births.

Of the 6,572 infants that survived the first month of life, 337 died before completing the first year of life; the mortality rate for infants in the second to twelfth month of life therefore was 51 per 1,000 infants alive at the beginning of the second month of life.

The Infant Mortality Rate was 84 per 1,000 live births.

# APPENDIX XIII

## INFANT DEATHS BY AGE IN MONTHS FOR THE YEAR 1961

AGE AT DEATH	DEATH IN FIRST YEAR OF LIFE				
	URBAN		RURAL		
	Number	% Distribution	Number	% Distribution	
Under 1 year .. ..	201	100	369	100	
Under 1 month .. ..	97	48.3	136	36.9	
Under 1 day .. ..	34	17.0	26	7.0	
1 - 6 days .. ..	39	19.4	60	16.3	
7 days - 1 month .. ..	24	11.9	50	13.6	
1 - 11 months .. ..	104	51.7	233	63.1	
1 - 2 months .. ..	33	16.4	49	13.3	
3 - 5 months .. ..	27	13.4	71	19.2	
6 - 8 months .. ..	20	10.0	68	18.4	
9 - 11 months .. ..	24	11.9	45	12.2	



# APPENDIX XIV

## CAUSES OF DEATH IN THE FIRST YEAR OF LIFE

NUMBER OF DEATHS: % DISTRIBUTION FOR THE YEAR 1961

CAUSE OF DEATH							DEATHS IN FIRST YEAR OF LIFE	
							Number	% Distribution
All Causes	..	..	..	..	..	..	570	100
Pre-natal and natal causes	..	..	..	..	..	..	242	42.5
Premature Birth	..	..	..	..	..	..	110	19.2
Congenital Malformations	..	..	..	..	..	..	18	3.2
Injury at Birth	..	..	..	..	..	..	18	3.2
Congenital Debility	..	..	..	..	..	..	28	4.9
Other Diseases peculiar to first year of life	..	..	..	..	..	..	58	10.2
Syphilis	..	..	..	..	..	..	1	.2
Tetanus	..	..	..	..	..	..	9	1.6
Respiratory Diseases	..	..	..	..	..	..	116 (a)	20.3
Gastro-intestinal Diseases	..	..	..	..	..	..	102 (b)	17.9
Epidemic and other communicable Diseases	..	..	..	..	..	..	12	2.1
Malnutrition	..	..	..	..	..	..	50	8.8
All other specified causes	..	..	..	..	..	..	44	7.7
Ill-defined and unknown causes	..	..	..	..	..	..	4	.7

(a) Pneumonia and other Respiratory Diseases.

(b) Chiefly Gastro-Enteritis.

# APPENDIX XV

## CAUSES OF DEATH IN THE FIRST YEAR OF LIFE

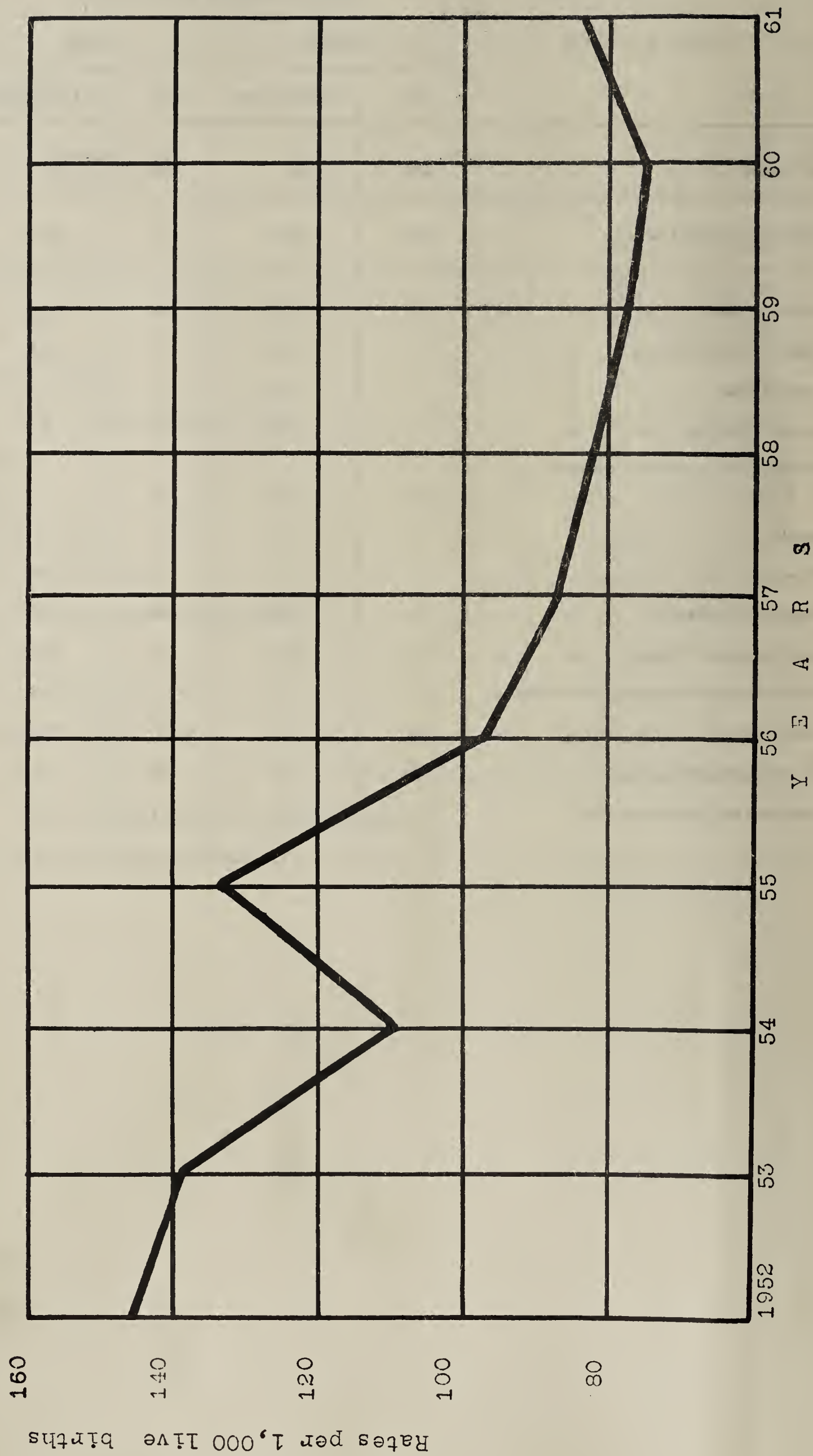
NUMBER OF DEATHS: % DISTRIBUTION FOR THE YEAR 1961

CAUSES OF DEATH	DEATHS IN FIRST YEAR OF LIFE			
	URBAN		RURAL	
	No.	% Distribution	No.	% Distribution
All Causes .. .. .	202	100	368	100
Prenatal and Natal Causes .. ..	102	50.5	140	38.0
Premature Birth .. .. .	56	27.7	54	14.7
Congenital malformations .. ..	7	3.5	11	3.0
Injury at birth .. .. .	7	3.5	11	3.0
Congenital debility .. .. .	9	4.5	19	5.2
Other diseases peculiar to the first year of life .. .. .	22	10.9	36	9.8
Syphilis .. .. .	1	.5	—	—
Tetanus .. .. .	—	—	9	2.4
Respiratory Diseases .. .. .	36	17.8	80	21.7
Gastro-intestinal Diseases .. ..	33	16.3	69	18.8
Epidemic and other communicable diseases	3	1.5	9	2.4
Malnutrition .. .. .	14	6.9	36	9.8
All other specified causes .. ..	14	6.9	30	8.2
Ill-defined and unknown causes ..	—	—	4	1.1



APPENDIX XVI

INFANT MORTALITY RATES PER 1,000 LIVE BIRTHS 1952-1961



APPENDIX XVII

**Tuberculosis:** *Deaths and Death Rate per 100,000 Population*

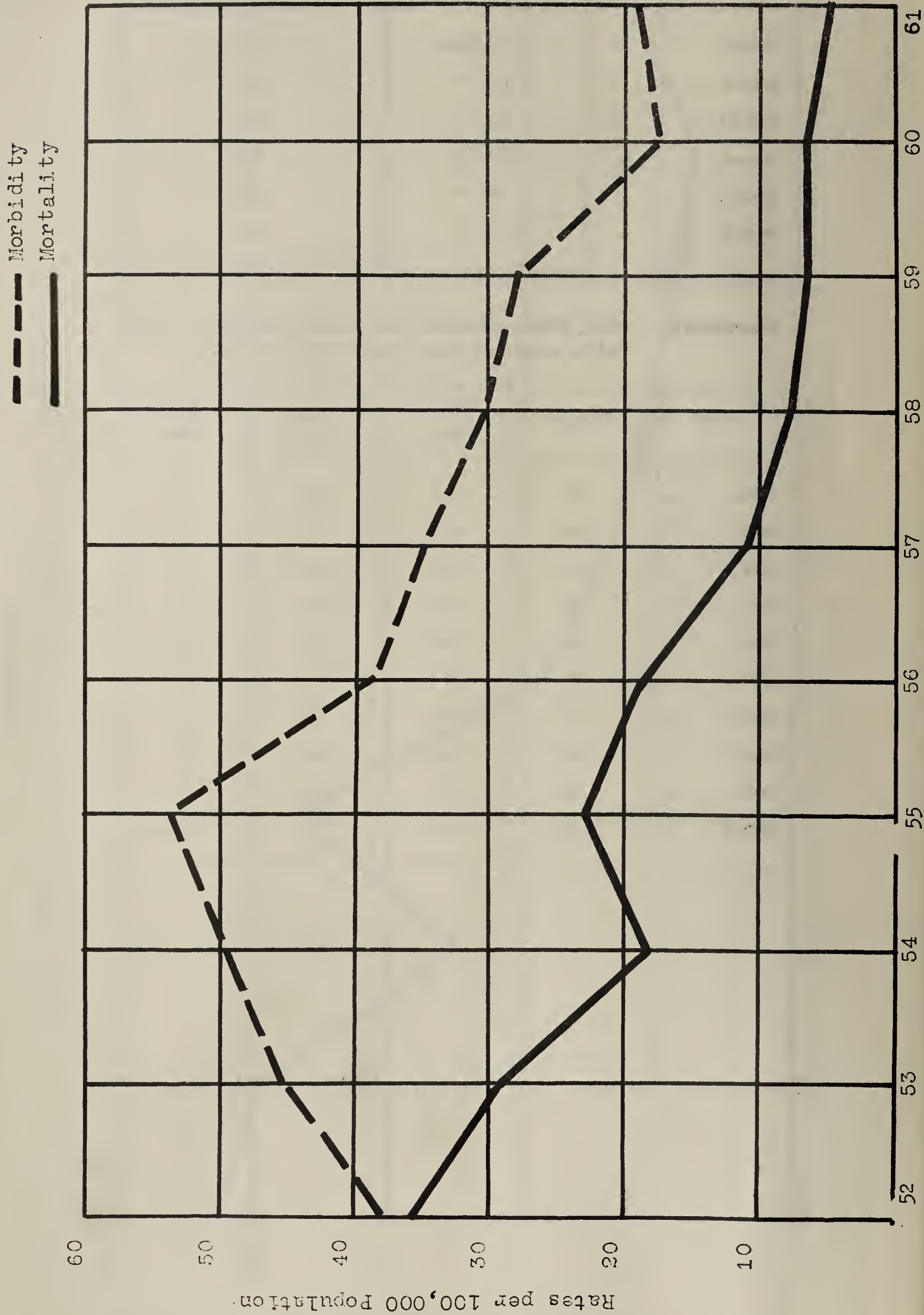
YEARS		No. of Deaths	Death Rate per 100,000 Population (estimated)
1930-34	..	111 (mean)	62.6
1935-39	.. ..	115 "	60.3
1940-44	.. ..	122 "	60.7
1945-49	.. ..	116 "	55.9
1950-54	.. ..	76 "	35.9
1955-59	.. ..	31 "	13.2

**Tuberculosis:** *Cases, Deaths, Morbidity and Mortality Rates per 100,000  
of the estimated population for period 1950-59*

YEAR		Cases	Morbidity Rate	Deaths	Mortality Rate
1952	.. ..	83	38.2	78	35.9
1953	.. ..	101	45.7	64	29.0
1954	.. ..	111	49.5	41	18.2
1955	.. ..	123	53.7	53	23.1
1956	.. ..	88	38.3	43	18.7
1957	.. ..	79	34.2	25	10.8
1958	.. ..	72	30.7	18	7.7
1959	.. ..	68	28.2	16	6.6
1960	.. ..	43	17.7	16	6.6
1961	.. ..	47	19.4	13	5.0

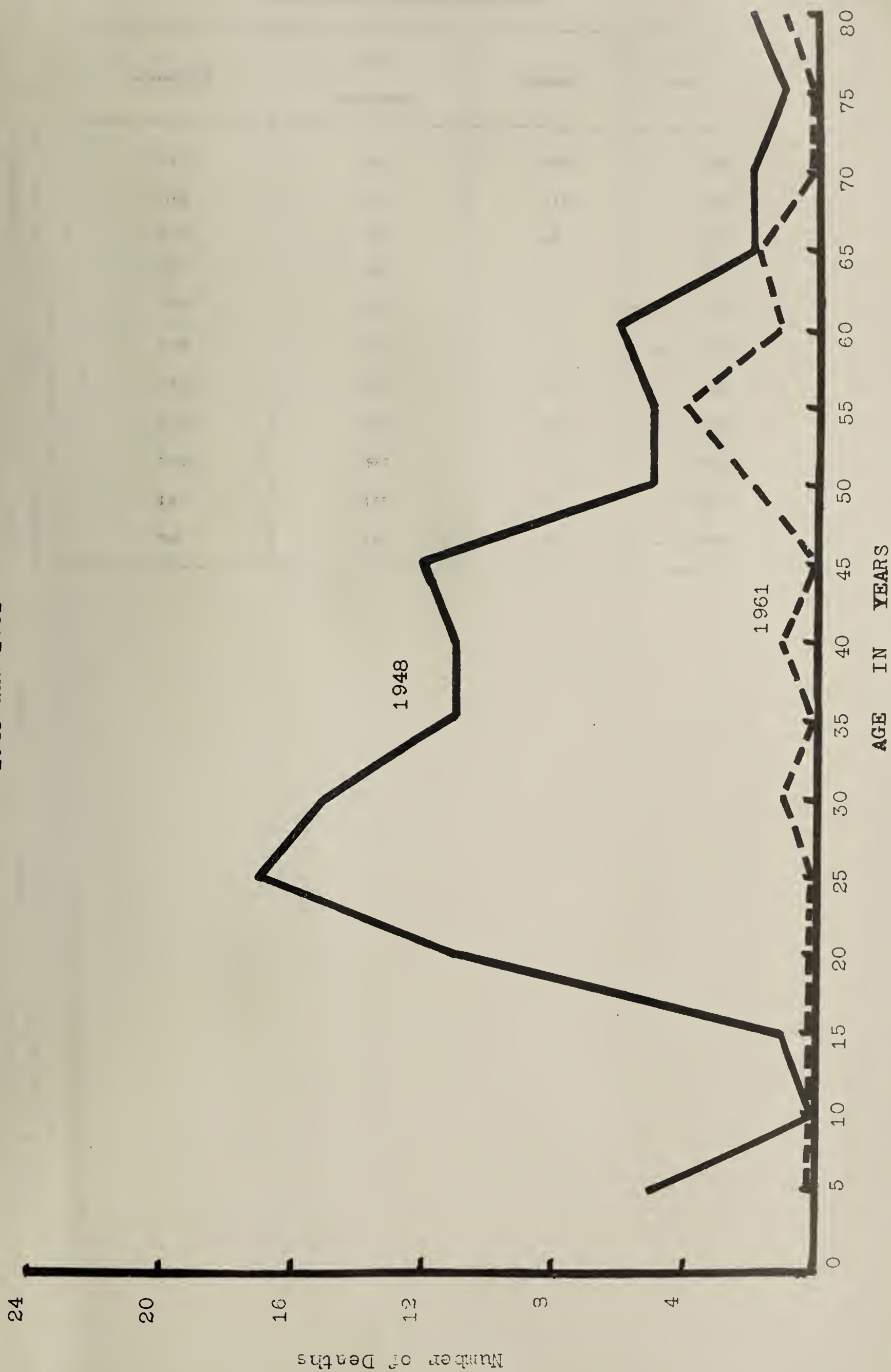


TUBERCULOSIS MORBIDITY AND MORTALITY RATES PER 100,000 ESTIMATED  
POPULATION FOR PERIOD 1952-1961



DEATHS FROM TUBERCULOSIS IN AGE GROUPS

1948 and 1961





**APPENDIX XX**  
**MENTAL HOSPITAL**  
**ADMISSIONS UNDER CERTIFICATION**

Year		Number	Total Admissions	Percentage
1951	..	188	263	71.5
1952	..	117	292	40.1
1953	..	86	348	24.8
1954	..	72	416	17.3
1955	..	77	434	17.7
1956	..	67	415	16.1
1957	..	64	516	12.4
1958	..	87	570	15.3
1959	..	77	558	13.7
1960	..	72	551	13.1
1961	..	54	611	8.8

PATIENTS ON OBSERVATION

YEAR	Remaining on 1st January, 1961			Admitted			Certified			Released Uncertified			Died			Remaining on 1st January, 1962			TOTAL		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
1955 ..	1	—	1	8	5	13	3	2	5	6	3	9	—	—	—	—	—	—	9	5	14
1956 ..	—	—	—	8	5	13	1	3	4	6	2	8	—	—	—	1	—	1	8	5	13
1957 ..	1	—	1	19	8	27	3	4	7	14	4	18	—	—	—	3	—	3	20	8	28
1958 ..	3	—	3	27	10	37	2	2	4	27	8	35	—	—	—	1	—	1	30	10	40
1959 ..	1	—	1	30	13	43	2	3	5	27	12	39	—	—	—	—	—	—	31	13	44
1960 ..	—	—	—	19	9	28	5	2	7	14	3	17	—	—	—	1	3	4	19	9	28
1961 ..	1	3	4	29	12	41	4	1	5	22	14	36	—	—	—	2	2	4	31	14	45



## APPENDIX XXII

## MENTAL HOSPITAL

TABLE SHOWING AVERAGE POPULATION, TOTAL ADMISSIONS, DISCHARGES, DEATHS, ETC.

YEAR			Average Population	Total Admissions	Population at end of year	No. of Discharges	No. of Deaths	Average Percentage	Percentage
1951	..	..	711	188	702	139	64	9.00	9.12
1952	..	..	704	292	701	180	60	8.52	8.56
1953	..	..	704	348	709	282	58	8.24	8.18
1954	..	..	709	416	719	371	35	5.00	4.87
1955	..	..	717	434	720	389	44	6.22	6.11
1956	..	..	716	415	715	368	52	7.26	7.27
1957	..	..	723	516	725	455	49	6.77	6.76
1958	..	..	734	570	740	502	53	7.22	7.16
1959	..	..	737	558	760	492	46	6.22	6.05
1960	..	..	759	551	762	496	53	6.98	6.96
1961	..	..	761	611	770	547	56	7.53	7.51

## APPENDIX XXIII

**MENTAL HOSPITAL**

## STATEMENT OF POPULATION

YEAR	ADMISSIONS												Deaths				On Trial at end of year				DISCHARGES												Total Population at end of year				Difference																								
	Population at beginning of year						Temporary						Voluntary						Certified						On Remand						TOTAL							Deaths						On Trial at end of year																	
M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T																										
1952	286	416	702	55	93	148	11	16	27	47	37	84	29	17	46	142	163	305	26	34	60	17	6	23	33	34	67	27	39	66	14	32	46	1	0	1	—	—	27	16	43	102	121	223	281	420	701	- 1													
1953	281	420	701	62	134	196	21	29	50	50	36	86	12	4	16	145	203	348	21	37	58	28	29	57	18	59	77	46	34	80	9	17	26	—	—	12	3	15	96	129	225	281	428	709	+ 8																
1954	281	428	709	109	150	299	44	32	76	45	27	72	4	5	9	202	214	416	16	19	35	20	36	56	51	63	114	40	54	94	32	27	59	2	2	4	19	14	33	5	6	11	149	166	315	298	421	719	+10												
1955	298	421	719	99	162	261	40	43	83	38	39	77	8	5	13	185	249	434	28	16	44	26	44	70	46	82	128	38	47	85	15	26	41	6	3	9	23	19	42	9	5	14	137	182	319	292	428	720	+ 1												
1956	292	428	720	104	172	276	35	24	59	34	33	67	8	5	13	181	234	415	25	27	52	28	29	57	23	48	71	36	47	83	38	43	81	5	7	12	25	27	52	7	5	12	134	177	311	286	429	715	- 5												
1957	286	429	778	133	224	357	35	33	68	44	20	64	19	8	27	231	285	516	22	27	49	48	71	119	32	59	91	54	45	59	25	28	53	4	3	7	30	33	63	17	8	25	162	176	338	285	440	725	+10												
1958	285	440	725	126	229	355	39	52	91	55	32	87	27	10	37	247	323	570	20	33	53	48	54	102	52	71	123	42	63	105	19	37	56	6	10	16	24	37	61	29	10	39	172	228	400	292	448	740	15												
1959	292	448	740	100	240	340	44	54	98	51	26	77	30	13	43	231	327	558	15	31	46	35	52	87	51	64	115	39	60	99	25	30	55	4	6	10	32	50	82	31	13	44	182	223	405	292	465	760	20												
1960	295	465	760	119	223	342	61	48	109	43	29	72	19	9	28	258	293	551	16	37	53	50	72	122	59	63	122	36	49	85	23	33	56	6	9	15	47	42	89	14	3	17	225	271	496	296	466	762	+ 2												
1961	296	466	762	163	228	391	66	60	126	34	20	54	29	12	41	287	324	611	23	33	56	57	80	137	55	75	130	35	45	80	21	39	60	7	10	17	47	41	88	23	12	35	250	297	547	302	468	770	+ 8												



## APPENDIX XXIV

### SCREENING FOR SYPHILIS: Observations on the serology of persons screened at Speightstown Health Centre 1953 - 1961

M. A. BYER

The Chairman of the Programme, Committee world Forum on Syphilis and other Treponematoses, in his invitation for September, 1962, issued to all individuals, engaged or interested in, the control of Syphilis, speaks, of "The recent upsurge of Syphilis, despite the availability of effective Therapeutic agents" as evidence of "the necessity of a revaluation, and redirection of our efforts."

If such revaluation and redirection is required in the U.S.A., how much more necessary is it for us in the West Indies?

The decision, to include screening for Syphilis as one of the regular, and continuing functions of the Health Department, in Barbados, was taken in 1953. The screening process still continues, at three major Health Centres in the island.

The Kahn Test, used during the first part of the period, was replaced in 1955 by the V.D.R.L. test, which is more sensitive, and also more specific.

In 1952 before screening was commenced, 8,828 Kahn tests were done for the whole island. In 1961, 32,869 V.D.R.L. tests were done. This four-fold increase has been due, very largely, to the "screening" done at the three Health Centres.

The advantages of using this continuing method of screening, instead of the "one-shot" crash programme, designed to screen a selected section of the population in a given period are:-

- (i) No additional staff is required.

In small departments, it is not possible to second staff for this type of assignment, and it is therefore necessary to undertake, only such work as can be carried out, in conjunction with the routine work of the Centre.

- (ii) "Cover" is provided for those who attend.

In small communities, it is very necessary to provide this "cover" for patients who attend V.D. Clinics. By combining screening with the other functions of the Centre, e.g. Ante-natal Clinics, Infant Clinics, Immunisations, etc., the general public does not know why each person visits the Centre.

- (iii) It is possible to arrange for the follow-up of cases.

Since this is a continuing process, the "positive reactors" are Not passed on to some other agency for treatment. The same staff which did the screening, follows the case if necessary, for several years.

- (iv) Costs are minimal.

By making use of centrally located buildings, and equipment, which have been provided for general public health services, the cost of the screening is considerably reduced.

Two important questions however, must still be answered:

- (i) Can you effectively screen as large a section of the community, by using this very much slower method?
- (ii) Is the time factor vitally important?.

During the period covered by this paper, 12,579 persons were screened. This represents 78% of the available population.

The total population of the three parishes served by the Centre is 36,575. Screening was not extended to the schools, and pre-school children. They represent 33% of the population. Of the remainder, it is generally recognised that a certain section of the community does Not use the services offered at Government Health Centres, largely because these services are "Free". These persons either go to their own private doctors, or they do without the service altogether. This section, would therefore, Not be available for screening for syphilis, in any case. It is very difficult to estimate the number accounted for by this group, since they vary with the degree of sophistication of the community. 8,000 is regarded as a fair "guess". This leaves 16,000, of which 12,579 have been screened i.e. 78% of the available population.

The great value of this continuing method of screening for syphilis is further appreciated, when it is recognised that each infectious patient, is expected to expose four others to infection, in a modern, moral climate, in which promiscuity is sanctioned, if it is not actually encouraged.

Screening is, moreover, the only effective method of tapping, the large reservoirs of untreated syphilis, which exist in our West Indian communities.

If we do Not find, and treat, the latent cases, a large percentage of them will develop late disabling manifestations — paresis, meningovascular syphilis, tabes, optic atrophy or cardiovascular syphilis. These are the patients who occupy, for long periods, expensive hospital beds.

#### RESULTS OF SCREENING

12,579 persons were screened in  $8\frac{1}{2}$  years, of these 7,344 were Females and 5,235 were Males. Many persons quite wrongly state the Emigration as the main reason for the increase in the number of blood tests which are done at our centres. "Blood tests", for emigration, however, are done almost entirely for Males. In all figures from the Health Centres Females applying for blood tests outnumber males. In this sample, Females outnumber males by 7:5.

The reason for this response on the part of the females is the health education done by the public health nurses at the Ante-natal and Infant Clinics.

Screening has uncovered a larger percentage of "positive" reactors in the 35—44 year age group. In this group 39% of the persons screened were "positive". It is here that screening by enabling us to discover the latent cases of syphilis, will prevent the later development of disabling illness requiring prolonged hospital and almshouse treatment.

In the age group for the younger females from the ante-natal and infant clinics the percentage of positives is 11%.

The importance of the "follow-up" after a full course of penicillin has been fully explained and it is encouraging to find that 27% of the cases have become Negative. Conversion to negative however may be delayed for 2 to 3 years in some cases.

In the 15—19 year age group conversion to Negative was obtained in 56% of the Males and 47% of the Females, in this younger group conversion takes place at an earlier date.

It is most encouraging to note the regularity with which the "positives" return for retests, and the interest which they take in becoming negative. 39% of all positives have returned for one retest. 20% have returned on two occasions. 14% returned on three occasions and 27% returned on 4 or more occasions.



Of the 12,579 persons who were screened, 1,647 showed a positive serological reaction. There is No yaws in Barbados, — Malaria has not been encountered since 1927, and the incidence of Leprosy is extremely low — 12 cases in a population of 230,000. "False positives" are therefore Not expected to play a large part in complicating the serology of these cases.

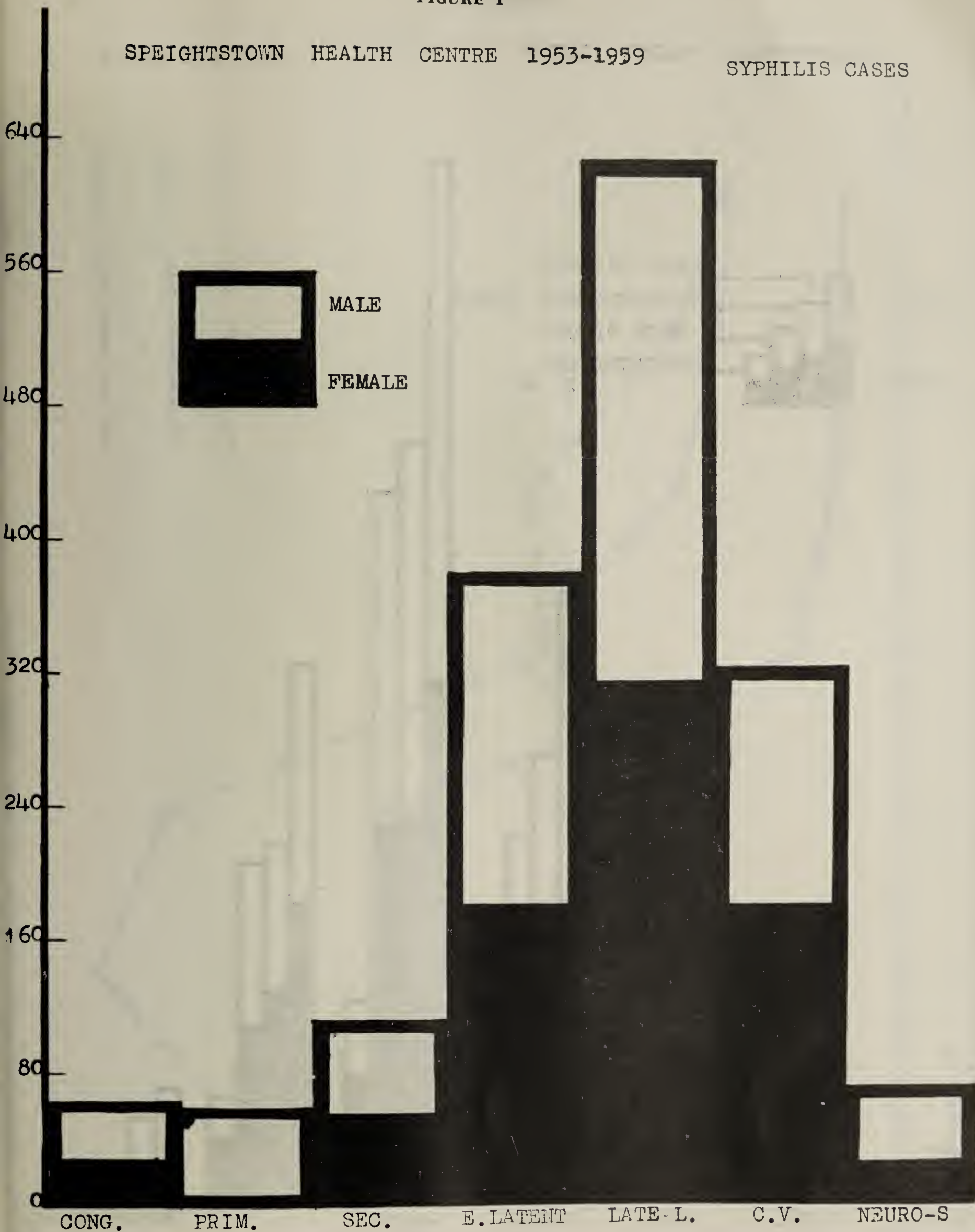
Further details are shown in the form of Graphs — see Figures I — IV.

This paper was presented at the Scientific Meeting of the Standing Advisory Committee for Medical Research in the Caribbean at its 1961 Meeting in Jamaica.

FIGURE 1

SPEIGHTSTOWN HEALTH CENTRE 1953-1959

SYPHILIS CASES



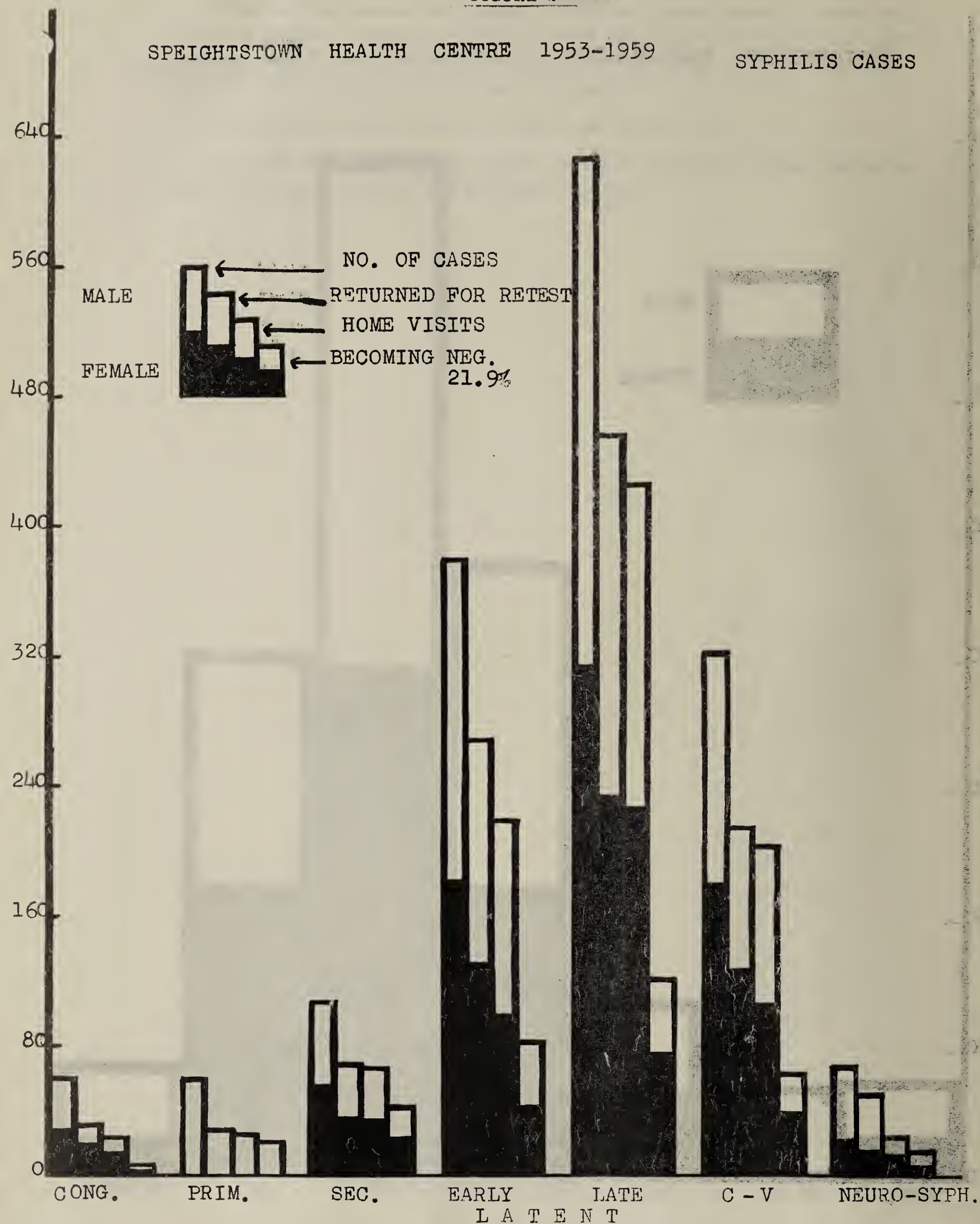
Note the large mass of latent cases. These would be entirely missed, if screening had Not been undertaken. They present No signs nor symptoms of syphilis, and are recognized only on the results of the blood test.



FIGURE 2

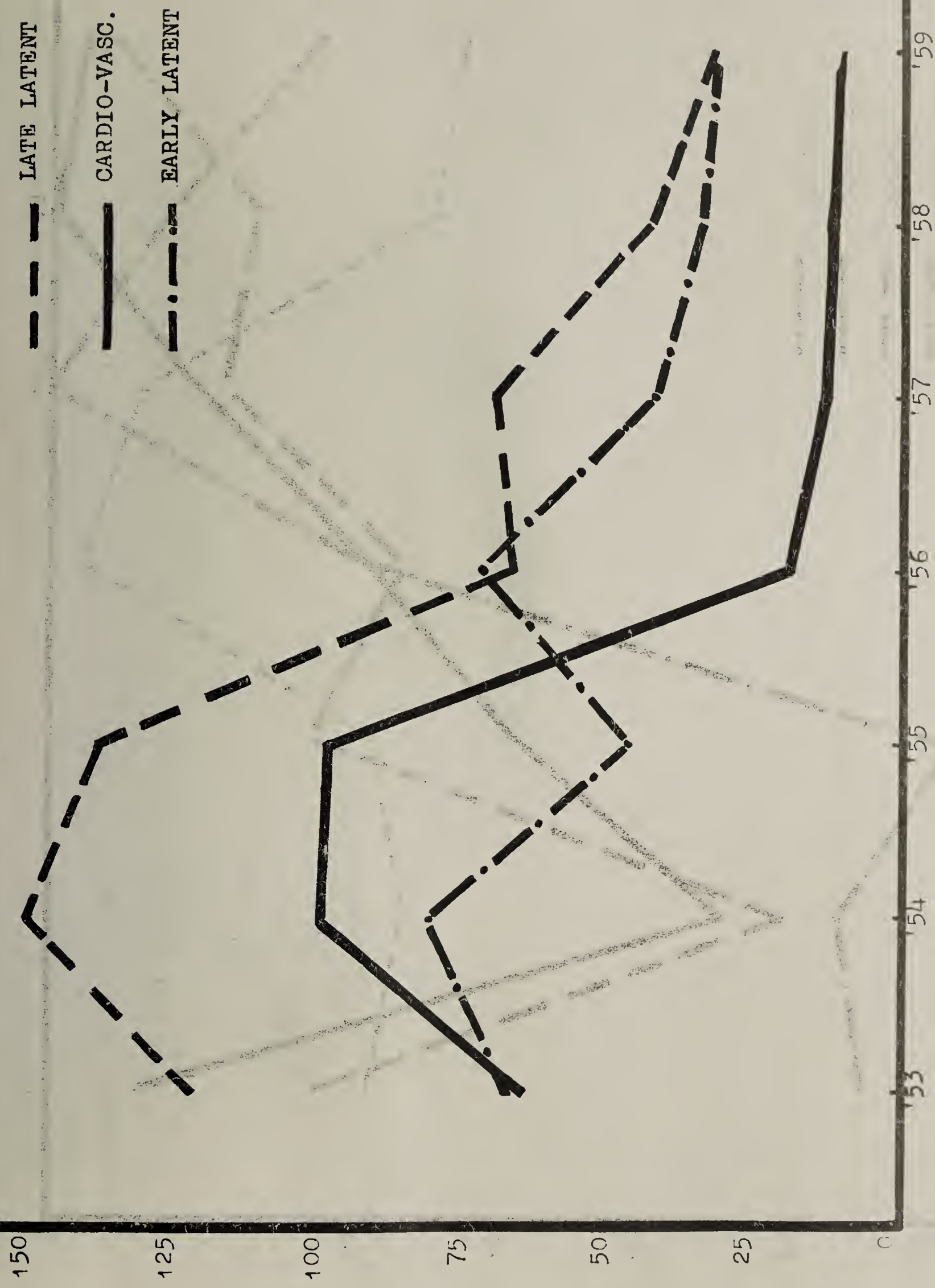
SPEIGHTSTOWN HEALTH CENTRE 1953-1959

SYPHILIS CASES



This follow-up of the cases indicates:-

- (a) The number of persons who return for retests after the completion of a full course of Penicillin treatment.
- (b) The number of cases actually visited at their homes by the Health visitors.
- (c) The number of persons who have become Negative after treatment.



Note the large intake of Cardio-Vascular syphilis and late latent syphilis in the first 3 years followed by the sharp reduction in these numbers in the 4th year when most of the existing cases in this community had been recognized. The change in the intake of early latent cases has not been great.

FIGURE 3





Note the disappearance of cong. syphilis, and sharp reductions in the numbers of Secondary syphilis and Neuro syphilis. The relatively high numbers for Primary and Secondary syphilis in '58 and '59 indicate that the "reservoir" of Infectious syphilis is still present; but that patients are reporting immediately for treatment - an indication of good health education.





